



BOROUGH OF KEIGHLEY

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

V. P. McDONAGH, M.B., Ch.B., D.P.A.

FOR THE YEAR

1966



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PREFACE.

The following report on the health of the Borough has been compiled along lines laid down by the Minister of Health.

The chief vital statistics for the year 1966 were :—

Estimated population	....	55,940	estimated mid-1966
Live Birth Rate	....	17.6	per thousand population
Death Rate	....	14.1	per thousand population
Infant Mortality Rate	....	18.3	per thousand live births
Neo-natal Mortality Rate...		12.2	per thousand live births
Stillbirth Rate	....	18.9	per thousand total births
Peri-natal Mortality Rate....		29.9	per thousand total births
Maternity Mortality Rate....		—	per thousand total births

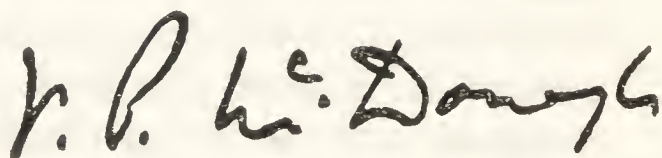
The vital statistics for the year show a decrease in one or two aspects as compared with the previous year when all the rates were the cause of some concern. Both the infant mortality and peri-natal mortality rates have shown a considerable fall. The number of children who died in the first twelve months was 18 as compared with 30 in the previous year, a considerable difference. Unfortunately there has been some slight increase in the stillbirth rate. All the deaths and the stillbirths and their circumstances are examined by the Consultant Obstetrician and the Medical Officer of Health in an effort to determine the causes and the degree of preventability, but so far little information of any value has accrued. However, it is obvious that much more research work must be carried out on infant deaths but obviously this sort of research is eminently more suitable for the larger cities and populations which deal with greater numbers.

Smoke control also moves on apace and it is hoped that by 1971 the whole town will be smokeless. From the small statistics available in the Borough it is difficult to show definite improvement in health, but we constantly hear observations from members of the public that they observe the increased cleanliness in the atmosphere, both visibly and in the lessening effects of the smoke on their paintings and curtains, etc.

We are now in sight of the end of our slum clearance programme and it is hoped that in the next few years we will have got rid of all the old unfit Victorian type houses without modern

amenities. However, this means that fresh efforts must now be made to modernise those houses which although structurally sound are at the present time lacking the modern amenities mentioned, bathroom, inside toilet, etc. With this in view the Medical Officer of Health has been asked to convene a meeting of all concerned to consider the town as a whole with a view to defining suitable re-development areas. In this connection it is not only the modernising of the houses that must be considered but also re-designing of the area with possible demolitions etc. so that the whole of the area to be re-developed is in conformity with modern standards.

An examination of the work of the medical and nursing staff among children and in general practice was extended during the year and details of the survey will be found in the body of the report. Unfortunately no firm conclusion can be drawn and we must therefore continue our efforts at valuing or re-valuing these two methods of prevention of child ill-health.



Medical Officer of Health.

Public Health Department,
3, Bow Street,
Keighley.

Telephone : Keighley 2244/5.

HEALTH COMMITTEE.

THE WORSHIPFUL THE MAYOR (ex-officio)
Councillor Mrs. E. M. FOULDS, M.B.E., J.P.

Chairman:

Councillor D. LITTLE.

Vice-Chairman:

Councillor J. WRIGHT.

Alderman J. H. WATERWORTH.

Councillor E. GRAYSTON.

Councillor E. M. HARKER.

Councillor J. LEES, M.A., L.I.B.

Councillor W. A. PROOM.

Councillor P. RILEY.

Councillor H. RUSHTON.

Councillor G. B. WELHAM.

STAFF.

(employed by the Borough Council and/or the West Riding County Council
at 31st December, 1966.)

V. P. McDONAGH, M.B., Ch.B., D.P.H.	Medical Officer of Health and Borough School Medical Officer.
D. E. GLEDHILL, B.C., Ch.B.	Senior Assistant County Medical Officer/School Medical Officer.
J. I. BENNET, M.B., Ch.B.	Assistant County Medical Officer/ School Medical Officer.
T. LINDSAY, M.A.P.H.I., M.R.S.H.	Chief Public Health Inspector.
S. SANDERSON, L.M.R.S.H.	Administrative Officer.
J. BUTTERWORTH, S.R.N., H.V., D.N., Q.N.S.	Borough Nursing Officer.

Technical Staff :

Public Health Inspectors	....	....	....	4
Meat Inspector	....	....	....	1
Technical Assistant	....	....	....	1
Pupil Public Health Inspectors	....	....	....	3

Midwives, Health Visitors, Home Nurses, Medical Auxiliaries, etc.:

Day Nursery Staff	....	....	....	7
Midwives	....	....	....	4
Health Visitors (1 part-time)	....	....	....	10
Assistant Health Visitors (7 part-time)	....	....	....	9
Home Nurses (2 part-time)	....	....	....	8
Domestic Helps (part-time)	....	....	....	90
Mental Welfare Officers	....	....	....	2
Home Teachers of the Blind	....	....	....	2

Clerical and other Staff:

Senior Clerks	....	....	....	....	2
Clerks	....	....	....	....	11
Abattoir Foreman	....	....	....	....	1

STATISTICS AND
SOCIAL CONDITIONS OF
THE AREA.

AREA AND POPULATION STATISTICS.

Keighley, which was incorporated as a Municipal Borough in the year 1882, then covered an area of 1,741 acres. An extension of the Borough in 1895 increased the area to 3,902 acres and a further extension in 1938 increased the area to its present 23,611 acres.

The population, according to the Registrar General's estimate for mid-year 1966, was 55,940. The estimate of the mid-year population of the Borough has fluctuated during recent years as follows:—

1962	....	....	56,070
1963	....	....	56,670
1964	....	....	56,190
1965	....	....	56,140
1966	....	....	55,940

According to the 1961 Census the population density was only 2.4 persons per acre. However, two of the Wards in the Borough, Central and South, had a population equal to 20.3 and 25.2 persons per acre respectively. The total acreage of the Borough when the survey was taken was 23,611 and the population 55,845, a decrease of 1,099 on the figure of ten years earlier.

The density figure of the Central and South Wards were in marked contrast to those of Oxenhope and Oakworth, where the figures were only 0.7 and 0.8 people per acre respectively. The figures for each of the ten wards were as follows:—

	Acres	Population	Persons per Acre
Central	206	4,720	20.3
South	234	5,906	25.2
East	1,558	5,678	3.6
Oxenhope	4,789	3,382	0.7
Haworth	1,802	3,923	2.2
Oakworth	8,383	6,321	0.8
West	1,326	8,251	6.2
North-West	1,018	6,684	6.6
North-East	555	5,505	9.9
Morton	3,737	6,023	1.6

The total number of private houses in the Borough was given as 19,645, with a population living in those premises of 54,671. Structurally separate dwellings occupied were 19,589 and the total number of rooms occupied 85,563; the density of occupation shows an average of 0.65 persons per room.

RATEABLE VALUE.

The Rateable Value as at 1st April, 1966, was £1,631,456, and the estimated product from a 1d. rate during the financial year 1966/67 £6,425.

MAIN FEATURES OF THE EMPLOYMENT POSITION.

We are indebted to Miss B. Y. Hatton, of the Keighley Employment Exchange of the Ministry of Labour for the following information.

Average Rate of Unemployment. The average number of persons registered as unemployed during 1966 in the Keighley, Haworth and Silsden district, were as follows:—

Wholly Unemployed:

Men and Boys ....	....	....	162
Women and Girls	....	....	72

Temporarily Stopped:

Men and Boys ....	....	....	6
Women and Girls	....	....	23

These figures are based on a count which is taken on a certain Monday each month and do not include workers who registered as unemployed during the same week, but on days other than the statistical Monday. The number of these "Non-Monday" short-time workers registered as unemployed was very low during 1966 and averaged only two.

The following details show how the registers varied throughout the year.

Wholly Unemployed. In January, 1966, 159 men were registered as wholly unemployed and this figure decreased gradually to 98 in June and then rose steadily to a total of 241 in December, the highest since January, 1964. The number of women registered as wholly unemployed was considerably less than the men, but the same trend is discernible from a total of 74 in January decreasing to 46 in June, thereafter rising steadily to 95 in November, followed by a slight decrease to 81 in December. Unemployment amongst boys and girls remained low during the year with only slight changes each month, except for increases in January, September and October, when more young people were on the register after leaving school.

Temporarily Stopped. Short-time working increased during the year, female workers being affected more than males. The highest figure was recorded in October, when seven men and seventy-two women were registered as temporarily stopped. Very few men were affected by short-time working during the year, the

highest number being twenty-two in December. The industries mainly concerned were Worsted Spinning and Manufacturing, Rayon Manufacturing and Top Making.

Total Unemployed Register. The gradual decrease in total unemployment, which was almost uninterrupted during 1965, continued until June, 1966, after which, the numbers rose steadily until the end of the year, when a grand total of 360 unemployed persons were on the registers.

The average rate of unemployment for men, women, boys and girls during 1966 was 0.8 per cent. of the employed population, as compared with the regional rate of 1.2 per cent. and the national rate of 1.5 per cent. Comparative figures for 1965 were local 0.8 per cent., regional 1.1 per cent., and national 1.4 per cent., showing that the Keighley district had withstood the 1966 financial measures rather better than the region or the country as a whole.

General Employment Position. Demands for labour remained high during the first six months of the year, but from July onwards a gradual decrease in the number of vacancies indicated a general tightening of the employment position. In January, there were 232 outstanding vacancies for men and 310 for women, rising to a peak of 291 and 404 respectively in April, but by December, labour demands had fallen to 158 for men and 205 for women. Vacancies for boys and girls showed a similar pattern, the highest figure recorded in June, and the lowest in December.

A number of redundancies occurred in 1966, mainly in the Worsted Spinning and Manufacturing industries, and although no difficulty was experienced in finding alternative employment for full-time workers, openings for part-time operatives became very scarce. The employment position deteriorated towards the end of the year, vacancies being considerably reduced and employers more selective. Prospects for 1967 will depend to a great extent on the Government's economic measures, but reports indicate that some redundancies and short-time working will continue in the first few months of the year.

VITAL STATISTICS.

			Total	Male	Female	Rate
Live Births:—						
Legitimate	....	....	905	502	403	
Illegitimate	....	....	79	39	40	
						Uncorrected 17.6 (a)
Total	....	....	984	541	443	Corrected 17.6 (a)

Illegitimate live births = 8.0% of total live births.

Stillbirths:—

Legitimate	....	....	17	8	9	
Illegitimate	....	....	2	—	2	
<hr/>						
Total	....	....	19	8	11	18.9 (b)
<hr/>						
TOTAL BIRTHS			1003	549	454	

Infant Mortality:—

Legitimate	....	....	16	10	6	17.7 (d)
Illegitimate	....	....	2	1	1	25.3 (e)
<hr/>						
Total	....	....	18	11	7	18.3 (c)

Neo-natal Mortality:—

Legitimate	....	....	11	7	4	
Illegitimate	....	....	1	—	1	
<hr/>						
Total	....	....	12	7	5	12.2 (c)

Early Neo-natal Mortality:—

Legitimate	....	....	10	6	4	
Illegitimate	....	....	1	—	1	
<hr/>						
Total	....	....	11	6	5	11.2 (c)

Perinatal Mortality:—

Legitimate	27	14	13	
Illegitimate	3	—	3	
<hr/>						
Total	30	14	16	29.9 (b)

Maternal Mortality:—	—	—	—	—	—	(b)
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Deaths:—

(all causes)	885	408	477	Uncorrected	15.8 (a)
					Corrected	14.1 (a)

Area Comparability Factor:—

Births	....	....	....	....	1.00
Deaths	....	....	....	....	0.89

(a) Rate per 1,000 estimated home population.

(b) Rate per 1,000 live and stillbirths.

(c) Rate per 1,000 live births.

(d) Rate per 1,000 legitimate live births.

(e) Rate per 1,000 illegitimate live births.

DEATHS.

Deaths registered during the year numbered 885, consisting 408 males and 477 females. This represented a corrected death rate of 14.1 per thousand population. The corresponding rate for 1965 was 13.1.

**REGISTRAR GENERAL'S RETURN OF CAUSES OF
DEATH REGISTERED DURING 1966**
(Residents only).

Diseases					Male	Female
1.	Tuberculosis, Respiratory	....	....	....	3	2
2.	Tuberculosis, Other	....	....	....	—	1
3.	Syphilitic Disease	....	....	....	1	—
4.	Diphtheria	....	....	....	—	—
5.	Whooping Cough	....	....	....	—	—
6.	Meningococcal Infections	....	....	....	—	—
7.	Acute Poliomyelitis	....	....	....	—	—
8.	Measles	....	....	....	—	—
9.	Other Infective and Parasitic Diseases	....	....	....	1	—
10.	Malignant Neoplasm, Stomach	....	....	....	7	14
11.	Malignant Neoplasm, Lung, Bronchus	....	....	....	24	3
12.	Malignant Neoplasm, Breast	....	....	....	—	9
13.	Malignant Neoplasm, Uterus	....	....	....	—	7
14.	Other Malignant and Lymphatic Neoplasms	....	....	....	25	27
15.	Leukaemia, Aleukaemia	....	....	....	1	3
16.	Diabetes	....	....	....	1	5
17.	Vascular Lesions of Nervous System	....	....	....	48	98
18.	Coronary Disease, Angina	....	....	....	103	62
19.	Hypertension with Heart Disease	....	....	....	7	11
20.	Other Heart Disease	....	....	....	37	51
21.	Other Circulatory Disease	....	....	....	17	27
22.	Influenza	....	....	....	5	8
23.	Pneumonia	....	....	....	24	39
24.	Bronchitis	....	....	....	48	39
25.	Other Diseases of Respiratory System	....	....	....	1	2
26.	Ulcer of Stomach and Duodenum	....	....	....	3	—
27.	Gastritis, Enteritis and Diarrhoea	....	....	....	1	3
28.	Nephritis and Nephrosis	....	....	....	5	8
29.	Hyperplasia of Prostate	....	....	....	2	—
30.	Pregnancy, Childbirth, Abortion	....	....	....	—	—
31.	Congenital Malformations	....	....	....	3	4
32.	Other defined and ill-defined Diseases	....	....	....	25	39
33.	Motor Vehicle Accidents	....	....	....	9	2
34.	All other Accidents	....	....	....	7	10
35.	Suicide	....	....	....	—	3
36.	Homicide and Operations of War	....	....	....	—	—
All Cases					408	477

Principal causes of death.—As previously, the majority of deaths occurred in persons over 65 years of age. The commonest causes of death were diseases of the heart and circulation, malignant diseases and respiratory diseases.

Tuberculosis.—There were 6 deaths from Tuberculosis during the year. We must, however, continue to make every effort to try and effect a complete eradication of this disease.

Year	Sex		Respiratory	Other	Total
1962	Male	....	9	—	9
	Female	....	—	—
1963	Male	....	5	—	6
	Female	....	—	1	
1964	Male	....	3	—	3
	Female	....	—	—
1965	Male	....	3	1	4
	Female	....	—	—
1966	Male	....	3	—	6
	Female	....	2	1	

Infectious Disease.—There was only 1 death from infectious diseases, the sex and cause being the same as that which occurred in the previous year.

Year	Sex	Diph- theria	Whooping Cough	Menin- gococcal Infections	Acute Polio- mye- litis	Measles	Other Infective and Parasitic Diseases	Total
1962	Male	1	—	—	—	—	3	4
	Female	—	—	—	—	—	—	
1963	Male	—	—	—	—	—	—	2
	Female	1	—	—	—	—	1	
1964	Male	—	—	—	—	—	—	2
	Female	—	—	—	—	—	2	
1965	Male	—	—	—	—	—	1	1
	Female	—	—	—	—	—	—	
1966	Male	—	—	—	—	—	1	1
	Female	—	—	—	—	—	—	

Cancer.—There were 120 deaths from Cancer during the year, which includes Leukaemia. The table set out below shows details of the deaths from Cancers in different sites for the last five years.

Sex differentiation will again be seen to be most marked in Cancer of the Bronchus.

Year	Sex	Stomach	Lung Bronchus	Breast	Uterus	Other Malignant and Lymphatic Neoplasms	Leukaemia Aleukaemia	Total All Sites
1962	Male	5	32	—	—	33	2	130
	Female	13	3	11	7	24	—	
1963	Male	10	29	—	—	37	—	137
	Female	7	1	10	5	38	—	
1964	Male	7	23	—	—	28	—	133
	Female	15	—	12	9	35	4	
1965	Male	10	32	—	—	33	1	131
	Female	8	1	10	4	31	1	
1966	Male	7	24	—	—	25	1	120
	Female	14	3	9	7	27	3	

Diseases of Heart and Circulation.—There were 315 deaths from heart disease and other circulatory diseases. The following table shows these diseases broken down for the last five years.

The total number of deaths from these conditions remains fairly static.

Year	Sex	Coronary disease angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Total
1962	Male	99	8	45	8	319
	Female	59	15	67	18	
1963	Male	87	7	30	16	287
	Female	58	12	62	15	
1964	Male	90	7	34	15	295
	Female	73	9	51	16	
1965	Male	102	5	23	13	291
	Female	70	11	59	8	
1966	Male	103	7	37	17	315
	Female	62	11	51	27	

Respiratory Diseases.—These diseases, which include Influenza, Pneumonia, Bronchitis and other diseases of the respiratory system, caused 166 deaths, which is a marked increase on those which occurred in the previous year.

Year	Sex	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Total
1962	Male	1	5	32	3	85
	Female	—	13	29	2	
1963	Male	1	31	37	3	127
	Female	—	28	24	3	
1964	Male	—	22	44	2	109
	Female	—	14	26	1	
1965	Male	—	22	28	3	86
	Female	—	14	18	1	
1966	Male	5	24	48	1	166
	Female	8	39	39	2	

Violence.—There were 17 accidental deaths registered during the year, other than motor vehicle accidents, of which 12 occurred in persons over 65 years of age. This is 7 deaths more than those for last year, and demonstrates how important it is that we should continue our efforts for the prevention of accidents, especially accidents to old people in the home.

Cause of Death	Sex	Age at Death (Years)						Total
		Under 1-	1-5	6-45	46-65	66-74	75 and over	
Accidental falls....	Male	—	—	—	1	—	2	9
	Female	—	—	—	—	—	6	
Accidents caused by burns and scalds	Male	—	1	—	—	—	—	2
	Female	—	1	—	—	—	—	
Accidents by coal gas poisoning....	Male	—	—	1	—	—	1	5
	Female	—	—	—	—	1	2	
Other and unspe- cified accidents	Male	1	—	—	—	—	—	1
	Female	—	—	—	—	—	—	
Total	Male	1	1	1	1	—	3	17
	Female	—	1	—	—	1	6	

Mortality from motor vehicle accidents.—Details of the numbers of deaths recorded in each of the last 5 years are as follows:—

Year	Sex		
	Male	Female	Total
1962	3	2	5
1963	3	8	11
1964	5	—	5
1965	8	8	16
1966	9	2	11

Causes of, and ages at death, of Infants dying under 1 year of age registered during 1966
(Residents only).

Cause of Death	Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks	1—3 months	4—6 months	7—9 months	10—12 months	Total under 1 year
Pneumonia	—	1	—	—	1	—	1	—	—	2
Bronchitis	—	—	—	—	—	—	—	1	—	1
Gastritis, Enteritis and Diarrhoea	—	—	—	—	—	1	—	—	—	1
Congenital Malformations	5	—	—	—	5	—	—	—	—	5
Other Defined and Ill-defined Diseases	6	—	—	—	6	1	—	1	—	8
All Other Accidents	—	—	—	—	—	—	—	—	1	1
TOTAL	11	1	—	—	12	2	1	2	1	18

DEATHS OF RESIDENTS REGISTERED DURING 1966.

Distribution as to place of death.

Central	East	North-East	North-West	South	West	Haworth	Oakworth	Oxenhope	Morton	Institu-tions	Inward Transfers	Total
28	40	39	47	47	56	48	41	20	31	395	93	885

Allocated according to age.

Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 and under 75	75 and over	Total
18	6	4	7	4	9	47	142	244	404	885

Comparative Statistics 1962-66.

Year	Esti- mated Popula- tion	Live Births			Rate (a)	Still Births			Rate (b)	Deaths			Rate (a)				
		Legitimate		Illegitimate		Total	Legitimate			Illegitimate	Total	Male Female		Total			
		Male	Female	Male			Female	Male		Female		Male			Female	Total	
1962	56,070	500	457	36	36	1029	18.4	7	9	1	1	18	17.2	412	427	839	14.4
1963	56,670	479	437	46	37	999	17.6	5	12	3	—	20	19.6	421	449	870	14.9
1964	56,190	449	469	48	41	1007	17.9	5	9	1	1	16	15.6	373	422	795	13.7
1965	56,140	482	408	49	44	983	17.5	7	7	3	—	17	17.0	394	397	791	13.1
1966	55,940	502	403	39	40	984	17.6	8	9	—	2	19	18.9	408	477	885	14.1

Year	Infant Mortality			Neo-Natal Mortality			Early Neo-Natal Mortality		
	Legitimate	Illegitimate	Total	Legitimate	Illegitimate	Total	Legitimate	Illegitimate	Total
	Male	Female	Rate (c)	Male	Female	Rate (c)	Male	Female	Rate (c)
1962	20	10	31	12	5	18	10	5	16
1963	10	13	24	7	8	16	5	8	14
1964	13	12	27	9	10	21	6	8	15
1965	17	12	30	14	10	25	10	4	15
1966	10	6	18	7	4	12	6	4	11

Year	Peri-Natal Mortality		Maternal Deaths	
	Legitimate	Illegitimate	Number	Rate
	Male	Female	(b)	(b)
1962	17	14	1	0.9
1963	10	20	1	0.9
1964	11	17	2	1.9
1965	17	11	—	—
1966	14	13	—	—

(a) Rate per 1,000 Estimated home population.
corrected in the case of Live Births and Deaths.

(b) Rate per 1,000 Live and Still Births.

(c) Rate per 1,000 Live Births.

Birth, Mortality and Infectious Diseases Rates for Keighley, the West Riding Administrative County and England and Wales.

	Keighley Municipal Borough	Administrative County	England and Wales	
Live Births	17.6	18.2	17.7	(a)
Stillbirths	18.9	14.4	15.4	(b)
Infant Mortality	18.3	19.8	19.0	(c)
Maternal Mortality	—	0.25	0.26	(b)
Deaths	14.1	12.9	11.7	(a)
Tuberculosis, Respiratory	0.09	0.05	0.04	(a)
Tuberculosis, Other	0.02	0.00	0.01	(a)
Tuberculosis, All Forms	0.11	0.05	0.05	(a)
Infective & Parasitic Diseases, excluding Tuberculosis, but including Syphilis and other V.D.	0.04	0.03	*	(a)
Cancer	2.15	2.00	2.25	(a)
Vascular Lesions of the Ner- vous System	2.61	1.87	*	(a)
Heart and Circulatory Diseases	5.63	4.48	*	(a)
Respiratory Diseases	2.97	1.72	*	(a)
Diphtheria	—	—	0.00	(a)
Dysentery	0.01	0.36	0.45	(a)
Typhoid Fever	—	—	0.00	(a)
Paratyphoid Fever	—	0.00	0.00	(a)
Erysipelas	0.01	0.03	0.03	(a)
Measles	6.24	10.04	7.15	(a)
Meningococcal Infection	0.01	0.01	0.01	(a)
Pneumonia Acute	0.07	0.22	0.17	(a)
Poliomyelitis Acute (including Polioencephalitis):				
Paralytic	—	—	0.00	(a)
Non-paralytic	—	—	0.00	(a)
Scarlet Fever	0.52	0.77	0.44	(a)
Whooping Cough	0.48	0.37	0.40	(a)

* Figures not available.

(a) Rate per 1,000 estimated home population.

(b) Rate per 1,000 live and stillbirths.

(c) Rate per 1,000 live births.

GENERAL PROVISION OF
HEALTH SERVICES
WITHIN THE BOROUGH

1.—SERVICES PROVIDED BY THE CORPORATION OF KEIGHLEY.

National Assistance Acts, 1948 and 1951.

Section 47 of the National Assistance Act, 1948, makes provision for securing the necessary care and attention for persons who:—

- (a) are suffering from grave chronic disease, or, being aged, infirm or physically incapacitated, are living in insanitary conditions; and
- (b) are unable to devote to themselves, and are not receiving from other persons, proper care and attention.

The Local Authority may on receipt of a certificate from the Medical Officer of Health, authorise an application to be made to a Court of Summary Jurisdiction for an Order to remove the person to a suitable hospital or other place and his detention and maintenance therein for a period not exceeding three months.

Under the provisions of the National Assistance (Amendment) Act, 1951, the Local Authority can, where urgent removal is considered necessary, authorise the Medical Officer of Health to take immediate action seeking an Order from a Court of Summary Jurisdiction to detain the person in suitable premises for a period not exceeding three weeks.

A number of cases continue to be brought to the attention of the Department each year; however, every endeavour is made to remedy or alleviate the circumstances before applying for a Court Order.

It was not found necessary to take any action under this legislation during the year.

National Assistance Act, 1948.

Section 50 of the above Act places on the Local Authority a duty to cause to be buried or cremated the body of any person who has died or been found dead in the area, in any case where it appears that no suitable arrangements for the disposal of the body have been or are being made.

It was found necessary to take action under the above section of the Act on one occasion only during the year.

Cleansing Station.

Due to the limited need to carry out all forms of disinfestation the cost of maintaining a Cleansing Station was found to be out of all proportion to the amount of work being carried out. In view of this, it was decided in 1962, to close the station and make arrangements with Bradford County Borough for all disinfestations to be carried out there. This has resulted in the provision of a much more economic and satisfactory service.

Mortuary.

The arrangement whereby bodies are accommodated in the Keighley and District Victoria Hospital Mortuary, where proper refrigeration facilities are available, has continued throughout the year on a permanent basis subject to termination by six months' notice on either side. This arrangement has once again proved to be most satisfactory.

Laboratory Service.

The bacteriological examination of specimens for General Practitioners are undertaken at The Public Health Laboratory in Bradford and at the Department of Pathology, Keighley and District Victoria Hospital. Doctors Smith and Stewart, who are in charge of these laboratories, have kept us fully informed of the results of all investigations, and we are extremely grateful to them for their willing and helpful co-operation.

This arrangement is undoubtedly necessary in order to enable the medical staff of the Department to investigate in the very early stages the outbreak of any infectious disease or food poisoning.

Hospital and Specialist Services.

For the purpose of administering the hospital and specialist services England and Wales are divided into fifteen Regions, each under the control of a Regional Hospital Board responsible to the Minister of Health. These Boards appoint Hospital Management Committees for the day to day control and management of groups of hospitals. Under the National Health Service Act hospital accommodation and treatment and the services of specialists are provided free of charge. If necessary, on medical grounds, the services of specialists are available at the home of the patient. There are three hospitals within the Borough of Keighley, which come under the jurisdiction of the Bingley, Keighley, Skipton and Settle Hospital Management Committee, as follows:—

(1) Keighley and District Victoria Hospital.

A general hospital for acute medical and surgical patients, with a total number of 136 beds.

The hospital is recognised by the General Nursing Council for England for the training of pupil nurses for state enrolment.

The hospital is also recognised by the Society of Radiographers for the training of student radiographers under the Bradford School of Radiography, and students are accepted for training for the examinations of the Institute of Medical Laboratory Technology.

In-patients, emergency and accident cases are admitted at any time. Patients on the waiting list are notified when a bed becomes available.

(2) St. John's Hospital.

This hospital comprises a geriatric unit with 72 beds for male patients and 108 beds for female patients, a general practitioner maternity unit of 16 beds for normal cases, and a consultant maternity unit of 31 lying-in beds and 14 ante-natal beds for abnormal cases.

The hospital is recognised by the Central Midwives Board for Part I training of pupil midwives.

(3) Morton Banks Hospital.

This hospital admits patients suffering from all types of infectious diseases, except pulmonary tuberculosis and poliomyelitis, and serves the whole of the area covered by the Hospital Management Committee. In addition, it has 54 beds for post-operative, orthopaedic and medical patients transferred from other hospitals for pre-convalescent care.

PREVALENCE OF AND
CONTROL OVER INFECTIOUS
AND OTHER DISEASES.

NOTIFICATION OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES.

The following diseases are notifiable in this area.

Anthrax, Cholera, Diphtheria, Dysentery, Encephalitis (Acute), Enteric (Typhoid and Paratyphoid) Fever, Erysipelas, Food Poisoning (or suspected Food Poisoning), Leprosy, Malaria, Measles, Membranous Croup, Meningococcal Infection, Ophthalmia Neonatorum, Plague, Pneumonia (Acute Primary and Acute Influenzal), Poliomyelitis (Acute), Puerperal Pyrexia, Relapsing Fever, Scarlet Fever, Smallpox, Tuberculosis, Typhus and Whooping Cough.

Included in the appendix is a table showing the numbers of all cases of infectious and other notifiable diseases originally notified during the year, and of the final numbers according to sex and age, after corrections subsequently made.

The following table shows the number of notifications of infectious and other notifiable diseases received and subsequently corrected during the years 1962 to 1966 inclusive.

Number of Corrected Notifications

	1962	1963	1964	1965	1966
Anthrax	—	—	—	—	—
Cholera	—	—	—	—	—
Diphtheria	1	6	2	—	—
Dysentery	23	—	—	5	1
Encephalitis (Acute)	1	1	—	—	—
Enteric (Typhoid & Paratyphoid Fever	1	—	—	1	—
Erysipelas	2	10	5	6	1
Food poisoning (or Suspected Food Poisoning)	—	—	—	—	5
Malaria	—	—	—	—	—
Measles	75	549	232	541	337
Membranous Croup	—	—	—	—	—
Meningococcal Infection	3	2	3	—	1
Ophthalmia Neonatroum	—	—	—	—	—
Plague	—	—	—	—	—
Pneumonia (Acute Primary and Acute Influenzal)	11	12	3	7	4
Poliomyelitis (Acute)	2	—	—	—	—
Puerperal Pyrexia	—	—	—	1	3
Relapsing Fever	—	—	—	—	—
Scarlet Fever	25	31	18	89	29
Smallpox	—	—	—	—	—
Tuberculosis	31	46	23	22	19
Typhus	—	—	—	—	—
Whooping Cough	3	18	71	2	27

Diphtheria.

No cases of Diphtheria were notified during the year and no persons were recorded as having died from this condition.

Dysentery.

1 case of Dysentery was notified during the year, compared with 5 in the previous year.

Enteric (Typhoid and Paratyphoid) Fever.

No cases of Enteric (Typhoid and Paratyphoid) Fever were notified during the year, compared with 1 in the previous year.

Food Poisoning.

1. Food poisoning notifications (corrected) as returned to R.G.:—

First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total
Nil	Nil	5	Nil	5

2. Particulars of Food Poisoning Outbreaks—1.
3. Particulars of Food Poisoning Cases—Nil.
4. Salmonella Infections. Not food borne—Nil.

The outbreak referred to above occurred in a works canteen. Faeces specimens were obtained from the 5 cases in question and submitted to the Public Health laboratory for examination. The reports which were subsequently received showed "Stapl. aureus present" in each case. Similarly samples of uncooked minced beef and cooked minced beef with onion obtained from the supplier and the canteen respectively both showed "Stapl. aureus present."

No cases of Food Poisoning were notified during the year 1965.

Measles.

337 cases of Measles were notified during the year, compared with 541 in the previous year. No persons were recorded as having died from this condition.

Ophthalmia Neonatorum.

No cases of Ophthalmia Neonatorum were notified during the year or in the previous year.

Poliomyelitis.

No cases of Poliomyelitis were notified during the year or in the previous year.

Scarlet Fever.

29 cases of Scarlet Fever were notified during the year, compared with 89 in the previous year. The disease continued to be mild.

Tuberculosis.

19 cases of tuberculosis were notified during the year, of which 15 were pulmonary in type, compared with 22 and 18 respectively in the previous year. 3 males and 3 females were recorded as having died during the year from tuberculosis—5 Respiratory and 1 Other. The total number of deaths, which amounted to 6, was 2 more than in the previous year.

Number of cases on Register 1st January, 1966				Number of cases added to Register during the year.			
Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
M	F	M	F	M	F	M	F
170	91	13	14	20	3	3	2
Number of cases removed from Register during year				Number of cases remaining on Register, 31st December, 1966			
Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
M	F	M	F	M	F	M	F
30	24	4	—	160	70	12	16

Included in the appendix is a table showing the number of notifications of Tuberculosis received, together with details of the number of new cases found other than by notification.

The Mass Radiography Unit of the Leeds Regional Hospital Board last visited Keighley during the year 1965 and will be undertaking the next survey during the year 1967.

Whooping Cough.

27 cases of whooping cough were notified during the year, compared with 2 in the previous year. No persons were recorded as having died from this condition.

Bronchitis.

During the year 48 males and 39 females were recorded as having died from this condition. The total number of deaths, which amounted to 87, was 41 more than in the previous year.

Influenza.

There was no influenza epidemic in this area during the year. However, 13 persons were recorded as having died from this condition, compared with none in the previous year.

Pneumonia.

During the year 24 males and 39 females were recorded as having died from this condition, which was 27 more than in the previous year.

NEW CLAIMS TO SICKNESS BENEFIT.

The total number of new claims to sickness benefit received each week in the local office of the Ministry of Pensions and National Insurance as notified by the Regional Controller of the Ministry of Pensions and National Insurance through the West Riding County Council, shows by its fluctuations some indication of the general health of the population, particularly in the progress of seasonal complaints and outbreaks of epidemic influenza.

ENVIRONMENTAL HYGIENE.

ENVIRONMENTAL HYGIENE.

HOUSING.

Slum Clearance.

The table in the appendix shows details of the Clearance Areas dealt with since 1958. A further programme of Clearance Areas is being considered, including an area in the Haworth district which the Civic Trust are desirous of retaining as an improvement area in support of a local housing association's representation. Such a project would, of course, only be possible with Ministry and Local Authority concurrence.

28 individual houses were dealt with by demolition orders and 26 by closing orders. Action in 14 other cases was suspended where the owners gave undertakings to make the property fit.

4 properties were removed from the schedule of unfit dwellings because they have been brought up to standard by the owners.

285 new houses were completed during the year by private enterprise, and 128 by the Local Authority.

Housing Improvement Grants.

During the year 230 applications for standard grants were approved and 228 completed, compared with 241 and 215 in the previous year. Total grants paid out for Standard Grants amounted to £26,832. In addition, 91 applications for Discretionary Grants were approved and 22 completed during the year, for which grants amounting to £5,227 were paid.

The department has not, as yet, taken any action under the Housing Act of 1964, for the compulsory improvement of dwellings to provide standard amenities. It has been agreed, however, to hold meetings of all interested Chief Officers to consider areas suitable for improvement.

Corporation Re-housing.

Re-housing on medical grounds continues as required, the Medical Officer of Health awarding priority points or making a firm recommendation as appropriate to each individual case. It is estimated that approximately 200/250 housing applications have been received, and between 60 and 70 have been recommended during the year. Reports are received from the Health Visitor or Public Health Inspector, depending on the circumstances of the case, and if necessary these are visited by the Medical Officer of Health. After due consideration and consultation recommendation is made to the Housing Committee. This is simply a straight forward medical recommendation, although at times preference is shown for a certain part of the town or warden supervised accommodation. It is sometimes difficult to separate medical and social

issues as far as housing is concerned. It is also a fact that where strong social feelings are involved, a recommendation is still required from the Medical Officer of Health. In Keighley, recommendations are considered for unusual circumstances, medical reasons being only one.

Rent Act, 1957.

During the year no applications were received for a certificate of disrepair.

Houses in Multiple Occupation.

A limited number of this type of house exists in the Borough, but those known to the Department are satisfactory in that the houses are under the control of a responsible property company who work in close co-operation with the Department on the question of structural fitness, provision of standard amenities and facilities. Many of these houses have had the benefit of grants for modernisation and smoke control works.

Sites for Movable Dwellings.

At the beginning of the year four sites for movable dwellings were licensed subject to the sanitary conditions being brought up to the standard specified in the licences.

There are several other sites for individual vans licensed and continually being improved within the Borough.

Sanitary Conveniences and Refuse Accommodation.

Continued inspections have been made during the year regarding sanitary and refuse accommodation, in connection with which improvements have been made throughout the period. 413 water closets were provided in connection with new houses.

In 1964 the Health Committee made a change in its policy with regard to the payment of grant for closet conversion, when instead of a standard payment of £10 it was agreed that a grant of half the reasonable cost be paid up to a maximum of £40. At the same time the policy of compulsory conversion of waste water closets was adopted.

There is a hard core of some 250 pail closets at premises where no statutory compulsion can be applied, due to the absence of pressure water supplies and public sewers. These are mainly in rural areas of the Borough, but Discretionary and Standard Grant schemes are reducing this problem gradually by the installation of septic tank drainage.

Notices Served and Complied With.

Details of the Notices Served, both Formal and Informal, will be found in the Appendix.

Hygiene in Factories.

The department is responsible for the inspection of the sanitary accommodation in all factories under the provision of the Factories Act, 1961. Conditions during the year were such that no complaints were received, and it was not necessary to serve any notices. Information of inspections and details found are shown in the appendix.

OFFENSIVE TRADES.

Three tanners and leather dressers are of such long standing as to be outside the powers of period licensing. A further similar trader was given a thirty years' period licence subsequent to the extension of his premises involving heavy capital expenditure.

The tripe boilers and rag and bone dealers are on annual licence. There are byelaws controlling the hygienic conduct of all the above offensive trades.

There are now nine established trades of these types in the Borough, comprising 4 Tanner and Leather Dressers, 2 Tripe Boilers, 1 Bone Boiler and Fat Refiner and 2 Rag and Bone Dealers.

During the year one registration was effected under the Scrap Metal Dealers Act, 1964, bringing the total number of registrations to 36.

RODENT CONTROL.

The post of the Rodent Operative within the department is combined with that of Driver Disinfecter, and the average weekly time allotted to the task of rodent control is limited. It can be seen from this that it is not possible for the departments to deal with infestations in business premises and treatments are restricted to those in domestic premises.

During the year 232 investigations were carried out, being 202 in private premises and 30 in local authority premises.

Sewers throughout the whole Borough were again treated during the year, when sodium fluoracetate was used by a private firm of rodent control specialists.

Premises such as refuse tips, sewage works, abattoirs, trunk and subsidiary sewers and other premises have been treated as frequently as was required during the year.

The Local Authority have powers of enforcement of rodent destruction in industrial and commercial premises, and recommend the employment of one of the many firms of specialists in this work, whose services are readily available for industrialists requiring them.

CLEAN AIR ACT.

On the 1st December, 1967, the sixth Smoke Control Area becomes operative, and at this date over 12,000 premises will be covered by such Areas, the first of which became operative on 1st June, 1962.

The survey of the sixth area was completed during the first quarter of 1965, and represented to the Health Committee for submission to the Ministry. It covers some 2,000 dwellings within the Parkwood, Long Lee and Thwaites Brow area. Subsequent changes in fuel policy necessitated the re-submission of the area towards the end of 1965, and confirmation was received on November 11th, 1966.

In the industrial field the Department have continued to work towards a complete survey. In accordance with national policy, industrial premises have been exempted from Smoke Control areas following improvement of combustion plant. Prior approval of such class of work was given in 3 cases.

FOOD HYGIENE (GENERAL) REGULATIONS, 1960.

Continuance in the practice of self-service in food shops and a consequent increase in the amount of food pre-packed for sale has again reduced the amount of open food found in shops and the resultant possibility of contamination. Public Health Inspectors have made inspections of the food handling premises, and have, where necessary, required the owners to carry out improvements and cleansing.

Bakehouses.

There are 55 bakehouses in the district, of which 4 are basement bakehouses under the Factories Act, 1961. These were inspected towards the end of 1963 and licensed for 5 years from 1st January, 1964.

Food and Drugs.

Details of the classes of food which were submitted by the Inspectors to the Public Analysts will be found in the appendix.

Milk Supply.

During the year Dealers' Licences have been issued as follows:—

Untreated	....	....	....	4
Pasteurised	....	....	....	8
Sterilised	....	....	....	9

MEAT AND FOOD INSPECTIONS.

Slaughterhouse Standards.

The slaughterhouses now in use in the Borough fully comply with the construction standards prescribed by the Slaughterhouse (Hygiene) Regulations, and the Slaughterhouse (Prevention of Cruelty) Regulations.

Public Abattoir.

Rota Inspection Service.

Inspectors attend on rota at all slaughtering hours to give a 100 per cent. system of inspection. There is close co-operation with the Ministry of Agriculture, Fisheries and Food officials in reporting the occurrence of post-mortem diseased conditions in carcasses to enable the tracing back to the farm source for investigation by the Animal Health Division. The Ministry also give an advisory bacteriological service on morbid specimens which need confirmatory diagnosis involving pathogenic and parasitic infections.

Factory Responsibilities.

A public abattoir is by definition now a factory with mechanical power and subject to inspection by H.M. Factory Inspectors.

Statutory records, abstracts of acts and notices must be kept and exhibited, including a general register of accidents, employment of young persons, cleansing of premises, certificates of tests, strengths and capacities of winches, chains and blocks, together with certified engineering insurance cover reports on prescribed equipment. An adequate first-aid outfit is essential, as is a special knowledge on first aid practice amongst the staff having control.

Grading and Certification.

The Ministry of Agriculture, Fisheries and Food deadweight grading and certification scheme is in operation at the abattoir, and careful co-operation with the Ministry officers is important. Early advice of the weight effect of condemnations is essential to correct grading and certification decisions by which the appropriate guaranteed price payments are made available to farmers and traders.

SHOPS ACT, 1950.

This Act deals with closing hours of retail shops, half day closing orders, hours of employment of young persons, and meal hours of shop assistants and Sunday trading restrictions. During

the year an amendment to regulations regarding half day closing was made by the Shops (Early Closing Days) Act, 1965, which provides for a shop's early closing day to be selected by its occupier. It has been found, however, that in many cases the introduction of new hours for shop assistants, particularly in the shoe trade, has meant that shops are closing for the whole day on Tuesday instead of the half-day as previously. In the food trade, alterations have been made to shop opening hours to accommodate the assistants and yet to permit the best service to be given to the public.

There are over 800 shops or premises carrying on retail business under the purview of this Act.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

It was reported in the 1965 Annual Report that it was intended to conduct a comprehensive inspection of the town's centre to ensure that all premises who should register under the Act had done so. An extensive programme of inspections is being carried out to ensure that establishments were complying with the Act. The impact on the Department has not been as serious as first thought, as the larger centres of employment of industrial administrative workers, local government and national undertakings are outside the statutory concern of the local authority.

General offices of the professional class of employers are adequate in their arrangements.

Numerous shop premises out of the town centre are business and dwellings combined, where members of the trader's family only are involved in self-employment, and hereby exempt from registration.

Details of registration and inspections under the Act, together with an Analysis of Persons Employed in Registered Premises by Workplace will be found in the appendix.

DISEASES OF ANIMALS ACTS AND ORDERS.

The summary of action taken by all officers, including the Divisional Inspector of the Ministry of Agriculture, Fisheries and Food, is as follows:—

Anthrax Order, 1938.

There were no cases of Anthrax recorded.

Tuberculosis Order, 1964.

No Form "A" Notices were served.

Swine Fever Order, 1963.

Number of Form "A" Notices served	....	Nil
Number of outbreaks confirmed	....	Nil
Number of Form "A" Notices withdrawn	....	Nil

Pet Animals Act, 1951 (Section 1).

During the year 5 premises were again licensed for use as pet shops, subject to the usual conditions.

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963.

The 7 Animal Boarding Establishments licensed during 1965 were re-inspected by the department and licences issued for a further twelve months.

WATER SUPPLY.

The Engineer to the Craven Water Board has kindly supplied the following information.

The total number of houses on public supply during the year was 19,803, serving a population of 56,000.

Average daily consumption of water per head of population for all purposes was 42.6 gallons, of which 12.6 gallons was metered and 30.0 gallons domestic and non-metered.

The following mains have been laid during the year:—

Extensions to Mains				Diameter			
				2in. yards	3in. yards	4in. yards	6in. yards
Crossfield Road	....	....	....		36		
Grey Stones Farm, Bogthorn	....	....				16	
Westburn Avenue	....	....				95	
Skipton Road	....	....	....			126	
Lime Street	....	....	....		16		
Skipton Road	....	....	....		4		
Skipton Road	....	....	....		8		
Skipton Road	....	....	....			16	
Cook Lane	....	....	....			132	
Colesway	....	....	....		12		
Oakworth Road	....	....	....				54
Sykes Reservoir	....	....	....	16			
Cook Lane	....	....	....		18	26	
Wheathead Estate	....	....	....		8		
Bow Street	....	....	....			65	
Oakworth Road	....	....	....		15	40	
Park Lane Flats	....	....	....		40		
Cherry Street	....	....	....		41		
Bronte Drive	....	....	....			98	
Barleycote	....	....	....		12		
Southlands	....	....	....		116		
Providence Crescent	....	....	....			108	
Souhtfield	....	....	....			132	
Bradford Road	....	....	....			32	
Woodhouse	....	....	....		33		
Oxenhope	....	....	....		32		
View Road Estate	....	....	....		67	24	
Oldfield	....	....	....			47	12
Churchill	....	....	....				33
Woodhouse Estate	....	....	....		47	68	
Sun Street	....	....	....			196	
West Lane, Haworth	....	....	....		40		
Southlands	....	....	....		13	72	
Woodhouse Estate	....	....	....		184	12	
Southfield	....	....	....			75	
Southlands	....	....	....			36	
Wheathead	....	....	....		110		
Elam Wood Road	....	....	....		88		
Town Centre	....	....	....			24	112
Spring Close	....	....	....		76		
Westburn Avenue	....	....	....			28	
Myrtle Estate	....	....	....		122		
Nesfield Estate	....	....	....			48	
Town Centre	....	....	....			144	
Westburn Avenue	....	....	....			52	
Total Yards	....	....	....	16	1138	1712	211

The water supply for the area has been satisfactory, both in quantity and quality.

The following water samples have been submitted for examination during the year:—

(i) **Bacteriological Examination.**

No. of Samples of Unfiltered Water 104

No. of Samples of Filtered Water 104

All samples were free from B.-Coli in 100 ml.

(ii) **Chemical Analysis.**

				Water Sheddles.	Treated Water Lower Laithe.
No. of Samples	....	....	12	12	
Average figures for the following in parts per million:—					
Colour (Hazen)	....	....	15	10	
Turbidity	....	....	5	5	
Electrical Conductivity	....	....	94	87	
Dissolved Oxygen	....	....	11.7	11.2	
Free C.O. ₂	....	....	2.5	1.6	
Iron	....	....	0.33	0.22	
Manganese	....	....	0.01	0.04	
Hardness:					
Temporary	....	....	9.2	3.1	
Permanent	....	....	12.3	28.9	
Total	....	....	21.5	32.0	
Reaction (pH. Value)	....	....	7.3	7.1	

Plumbo Solvency Samples.

		Date Sample Collected	Approx. length of lead service pipe	Result of Examination Lead pH Content value (part per million)	
Keighley M.B.					
Water Sheddles.					
After standing in pipe for measured period of half-an-hour	....	20.4.66	40ft.	Nil	6.8
After standing in pipe all night	....	20.4.66	40ft.	Nil	6.7
After standing in pipe for measured period of half-an-hour	....	6.10.66	40ft.	Nil	6.4
After standing in pipe all night	....	6.10.66	40ft.	Nil	6.4

**Sladen Valley via Bracken Bank
Storage Reservoir.**

After standing in pipe for measured period of half-an-hour	....	20.4.66	25ft.	Nil	6.7
After standing in pipe all night	....	20.4.66	25ft.	Nil	6.6
After standing in pipe for measured period of half-an-hour	....	6.10.66	25ft.	Nil	6.4
After standing in pipe all night	....	6.10.66	25ft.	Nil	6.5

Chemical tests covering the whole of the supply indicate the freedom of lead carbonates.

DUTIES FULFILLED BY THE BOROUGH ENGINEER'S DEPARTMENT.

We are indebted to Mr. J. D. Jennings, Borough Engineer, for the following information.

Sewerage and Sewage Disposal Schemes.

- (a) Completed during the year:
 - (i) Bow Street Sewer relining, 131 yards 21in. dia. sewer.
 - (ii) Main Drainage Relief Sewer No. 3, Fell Lane to Wheathead Lane Sewer, approx. 1,488 yards 27in.-15in. dia.
- (b) Under construction at year end:
 - (i) Approx. 140 yards of the River Worth to Earl Street Sewer were laid through the newly developed building site.
 - (ii) Marley Sewage Disposal Works Extension, Contract No. 2, comprising the building of two humus tanks, installation of a new sewage pump and measuring weir. Renewal of No. 6, 154 feet diameter biological filter distributors, together with pipework and feed channels and a 36in. diameter overflow sewer.
- (c) Awaiting approval at year end:
 - (i) Earl Street to River Worth Sewer, 18in-48in. dia., approx. length 770 yards.
- (d) In preparation at year end:
 - (i) High Level Trunk Sewer, that is Marley Sewage Disposal Works to Oxenhope Sewage Disposal Works.
 - (ii) Sewer enlargement in Ripley Street to the Canal, 21in. dia.

Details of any part of the district requiring:—

- (a) Sewers:
 - (i) Moorside, Oxenhope.
 - (ii) Goose Eye, Laycock.
- (b) Improvement of defective sewers:
 - (i) East Morton-Bradford Road to Freedom Mills.
 - (ii) A sewer is required from the River Worth at Strong Close to Long Lee to give relief to sewers in Thwaites Brow Road and Hog Holes Clough.
 - (iii) An overflow sewer is required for the Damems Sewer Overflow to the River Worth at Ingrow.

- (c) Sewage Disposal Works: Nil.
- (d) Improvement or extensions of sewage disposal works:
- (i) Oakworth, Haworth and Oxenhope Sewage Disposal Works are to be abandoned and the flows brought down to the Marley Sewage Disposal Works. Extensions to the Works at Marley will be necessitated by the schemes.
- (e) Attention to storm water overflows:
- The proposals outlined in 3(d) above will deal with a number of unsatisfactory overflows that exist.

Swimming Baths and Bathing Pools.

The Corporation Baths in Spencer Street are well patronised. Facilities are available there for swimming in the first and second class pools. Lettings are made of the Pools to a number of Clubs operating in the Keighley district.

There are also facilities for Turkish Bath treatment, Sunray treatment, as well as Slipper Baths.

The number of patrons at the public baths were as follows:—

For Remedial Services	....	....	2,121
For Sunray Services	....	....	3,455
For Slipper Bath Services	....	....	29,641
For Swimming	....	....	107,282
For Galas	....	....	11,979
For Schools	....	....	56,533
			<hr/>
			210,011
			<hr/>

A number of water samples were submitted for bacteriological examination, all of which have been reported free of bacteria.

Number of houses demolished.

- (a) In Clearance Areas declared under Section 42 of the Housing Act, 1957:

- (i) Worth Village Clearance Area:

Timber Street	....	....	4 houses
Cherry Street	....	....	13 houses
Marlow Street	....	....	8 houses
Louisa Place	....	....	7 houses
York Street	....	....	16 houses
Grape Street	....	....	13 houses
Dalton Lane	....	....	8 houses
Louisa Street	....	....	6 houses

Arthur Street	....	....	20 houses
Daisy Street	....	....	23 houses
Milton Street	....	....	20 houses
Lorne Street	....	....	12 houses
Water Street	....	....	13 houses
Rose Street	....	....	12 houses
Edward Street	....	....	11 houses
Alfred Street	....	....	14 houses
Close Street	....	....	14 houses
Gate Street	....	....	13 houses
Owen Street	....	....	12 houses

A total of 239 houses

(ii) Mohair Street-Woollen Street-Mount Street
Clearance Area:

Mount Street	....	....	6 houses
Buckle Street	....	....	8 houses
Lustre Street	....	....	13 houses
Martin Street	....	....	11 houses
Orleans Street	....	....	2 houses

A total of 40 houses

**Number of houses built, and the Wards
in which they are situated.**

(a) Private Enterprises:

East	....	....	....	46
West	....	....	....	78
North-West	....	....	....	46
Oakworth	....	....	....	61
Haworth	....	....	....	6
Oxenhope	....	....	....	19
Morton	....	....	....	29

Total 285

(b) Corporation:

East	....	....	....	81
South	....	....	....	19
Oakworth	....	....	....	28

Total 128

**Lengths of new sewer laid and lengths of existing sewers
re-laid during the year.**

A total of 1,823 yards have been laid.

Private Streets which have been surfaced.

Under Private Street Works Act:

Southfield Way	....	41 lin. yards
Ruth Street	....	72 lin. yards
Lismore Road	....	131 lin. yards
Simpson Street	....	80 lin. yards
Greenhead Drive	....	146 lin. yards
Birchwood Drive	....	139 lin. yards
Total	....	<hr/>609 lin. yards <hr/>

Under Section 40 Agreements:

Spring Avenue (part)	....	224 yards x 6 yards
Spring Rise	....	60 yards x 6 yards
Spring Close	....	50 yards x 5 yards
Branshaw Drive (part)		55 yards x 6 yards
Branshaw Grove	....	110 yards x 5 yards
Branshaw Mount	....	120 yards x 5 yards
Access Road to Bronte Drive	....	50 yards x 6 yards

Comments on the progress made in the Town Planning Scheme.

Implementation of the proposals contained in the approved Comprehensive Development Area has been continued. The development is being carried out by the Murrayfield Real Estate Co. Considerable progress has now been made in the scheme. Widening of Hanover Street (portion) has been carried out and the construction of Worth Way between Low Street and Longcroft.

Construction of a new multi-storey car park at Damside has been commenced. Demolition works proceed as and when properties become empty in the town centre in accordance with the phasing of programmes.

Refuse Collection.

A weekly collection of domestic refuse has been maintained in the whole of the Borough. This collection is supplemented by special collections in which virtually everything offered for disposal is received. The majority of these collections are made free of charge in order to try to eliminate tipping of items such as settees, mattresses, prams, cycles and so on, on the moorlands and on waste land in the built-up areas. This practice of dumping refuse, nevertheless, still exists, though there is no excuse for it.

The number of lavatory pails has diminished slightly once again and there are now approximately 232 emptied each week.

Trade refuse is collected as requested, the majority being done regularly on a contract basis, at the approved charges. The

1½ cubic yard Refuse Storage Bulk Containers are serving a useful purpose for many tradespeople, some of whom hire them from the Cleansing Department, others having bought their own.

Some 38 notices were served to provide dustbins, but usually a personal visit results in co-operation before such a stage is reached.

A system of collecting and disposing of old derelict or abandoned cars has been in operation during the year, and a number have been dealt with.

There have been again an increase both in volume and weight of refuse collected. This is attributed to the rising standard of living and more modern methods of packing material and pre-packing foods.

The total refuse collected in the Borough amounted to 316.7 tons per 1,000 population, which gives on average of 6.3 cwts. per person per annum for the Borough.

Refuse Disposal.

Practically the whole of the refuse collected in the Borough is disposed of by controlled tipping at Sugden End Tip. The Tip at Griffe Fields, Oakworth, is receiving only refuse from the Oakworth area. The Penistone Quarry Tip, Dimples Lane, at Haworth, is used only for the disposal of soil spoil from building sites and old stone and mortar, etc., from demolition. Waste paper is collected separately and divided into fibre board, newsprint and mixed gradings. During the year the total weight of refuse disposed of was 37.183 tons. The income from salvage material was £6,116, and the amount of refuse collected by the Department amounted to 17,124 tons. 36 abandoned or derelict cars were disposed of.

DELEGATED HEALTH
AND
WELFARE SERVICES

Care of Mothers and Young Children

(Section 22 National Health Service Act, 1946).

Premises. Details of the various clinics provided in the Borough will be found in the appendix. At the end of the year the premises consisted of 143, Skipton Road, and rented premises in Haworth, Morton, Oxenhope, Oakworth, Victoria Park. The premises in Haworth are a specially built General Practitioners' Surgery, which are excellent for our purpose.

Child Welfare Clinics. The total number of children brought to the Clinics during the year was 1,602, who between them made 14,455 attendances. Of the children who attended the clinics 606 were born in 1966, 497 in 1965 and 499 in 1961/64.

Day Nurseries. The one day nursery in the Borough provides accommodation for 50 children in the 0 to 5 age group. The total number of children on the register at the end of the year was 11 in the 0 to 2 age group and 38 in the 2 to 5 age group, as compared with 13 and 33 respectively in the previous year. The average daily attendance during the year in the 0 to 2 age group was 9.57 and in the 2 to 5 age group 26.99.

Care of the Unmarried Mother and Her Child. Details of the number of cases dealt with during the year will be found in the appendix. There were 81 illegitimate births assignable to the Borough for the year as compared with 96 in the previous year. Of these 79 were live births and 2 stillbirths. The illegitimate live births in the town represents 8 per cent. of the total live births, as against 9.5 per cent. in 1965, 8.8 per cent. in 1964 and 8.3 per cent. in 1963. 72 cases of illegitimacy were dealt with by the Department during the year; of these, 29 were in the 15 to 19 age group, 19 in the 20 to 24 age group, 12 in the 25 to 29 age group, 8 in the 30 to 39 age group, and 4 in the 40 and over age group.

Dental Treatment for Expectant and Nursing Mothers. This service continued to be carried out by the school dentist on the recommendation either of the clinic medical officer or the patient's general practitioner.

Scheme for the Notification of Congenital Defects Observed at Birth. This scheme provides for the notification to the department of all congenital defects observed within 36 hours of birth in the case of live births, and at birth in the case of stillbirths. The birth notification card has been overprinted in order to record these details, and is completed as appropriate. A total number of 16 such notifications were received during the year.

Phenylketonuria. Urine testing for Phenylketonuria is undertaken to discover at the earliest possible moment the condition in the child which, if neglected, would give rise to serious mental defect. As in previous years, the health visitors have carried out the tests. 918 such tests were carried out during the child's fourth week of age or under, 48 over four weeks but less than six weeks, and 4 at six weeks of age or over. Of the 970 tests carried out, 2 were found to be positive, and were referred to the hospital service for further investigation. Both these cases were confirmed and are under special dietetic treatment laid down for these cases.

Screen Testing for Deafness by Health Visitors. During the year 90 children were considered to be "at risk" and were tested by the health visitors. Of these, 4 were found to be mentally retarded and 4 were considered to require further investigation of hearing capacity, 3 were referred to general practitioners, and 4 to the deputy medical officer of health. So far we have been able to cope only with the "at risk" group. However, in the future we intend to hold weekly clinics so that all children may be tested at the age of 8 months. The reasons for testing range from poor speech development, family history of deafness, mental retardation and queried deafness.

Care of Premature Babies. Details of premature babies born in 1966 will be found in the appendix.

Domiciliary Midwifery

(Section 23, National Health Service Act, 1946).

During the year the staff of four midwives were responsible for the care of 74 domiciliary patients, and 641 patients following their discharge from hospital. The staff attend 11 weekly ante-natal sessions held in general practitioners' premises, details of which are shown in the following table. These cover the work of 16 family doctors and consequently very few patients are deprived of the services of a midwife during their pregnancy. The emphasis now being on ante-natal care and teaching. During the year we carried out a midwives works study and details are as shown in the subsequent table.

Midwives Work Study

Week 22nd-28th May, 1966.

Midwife	Office Work	Travelling Time	Fixed Sessions	Midwifery Visiting	Home Help Visiting	Total
Midwife A	6 hrs.	7 hrs. 5 mins.	7 hrs. 4 mins.	9 hrs. 20 mins.	4 hrs. 39 mins.	34 hrs. 8 mins.
Midwife B	3 hrs. 54 mins.	9 hrs. 19 mins.	9 hrs. 5 mins.	7 hrs. 26 mins.	6 hrs. 58 mins.	34 hrs. 42mins.
Midwife C	4 hrs. 28 ins.	9 hrs.	5 hrs. 25 mins.	25 hrs. 59 mins.	—	44 hrs. 52 mins.
Midwife D	1 hr. 35 ins.	5 hrs. 4 mins.	11 hrs. 7 mins.	5 hrs. 40 mins.	4 hrs. 56 mins.	28 hrs. 22 mins.

Health Visiting

(Section 24, National Health Service Act, 1946).

The attachment of the health visitor to general practice has continued and has now been in operation for almost six years. This attachment has now reached the level of 100 per cent., as is so with the midwifery and home nursing services. There has been little change in the kind of work done by the health visitor during the year, or in the relationship between her and the general practitioner. However, last year a short survey was carried out to try and evaluate the function of the modern child welfare centre as we were rather concerned with its future as so many patients were, we thought, being seen by the health visitor in the general practitioners' surgeries. Carrying on from this point, a further survey was carried out during the year in order to see what other information might be brought to light. In the earlier survey 210 mothers were interviewed and the questions asked related mainly to the purchasing of food, immunisation, weight checking, and the extent of contact with the health visitors. From the results obtained it was obvious that the weighing of children and purchasing of food remained a dominant factor in most parents' minds, and this was fairly conclusively demonstrated by the high proportion who attended for no other reason. To some extent mothers failed to appreciate the true function of the centre as they were obsessed by their wish to weigh their children and buy food. We also became aware that in fact some duplication of effort was taking place in that some families now seemed to be attending both child welfare centre and family consulting sessions, and we felt we should have more information regarding this. The initial survey was useful in that it gave us a small amount of factual information and a little experience in conducting an exercise of this type, but on the whole it only demonstrated that we had been too superficial in our questioning to be purposeful and that the field had been too limited to be representative, i.e. since a great deal of child welfare is now carried out by the health visitor on general practitioners' premises, we obviously should have included this area of work in the enquiry.

We therefore decided to carry out a further survey which would include both establishments and to interview all mothers attending centre and surgery sessions. We hoped to be more searching in our questioning, the purpose of the survey would be:

- (a) To attempt an assessment and evaluation of the present function of both the child welfare centres and the family consulting sessions now held in general practitioners' surgeries.
- (b) To discover how much duplication of effort exists in relation to the attendance of pre-school children at both establishments.

- (c) To ascertain their future role and whether in fact they should both continue to function or one service should become redundant.
- (d) At the family consulting sessions we try to encourage any member of the family who has a health visiting problem to attend, e.g. an elderly parent or an unmarried mother, and we wanted to demonstrate how much of this work is in fact being carried out.

It was our intention to interview everyone who attended the child welfare centres and surgeries during one week, but unfortunately the weather was bad and consequently attendances low, so that they were not truly representative. We therefore extended the survey to another week, but we excluded from the second week anyone who had been interviewed during the first. The total of 529 relates therefore to individuals and not attendances. We used a structured interviewing technique in the survey. Separate forms were used for local health authority sessions and general practitioners' surgeries, but the main body of the forms was similar, varying only where they must. For example, the question relating to weighing and purchasing of food had to be omitted from the surgery forms since neither of these services are available at these sessions. In an attempt to illicit any hidden reason for attending which might exist, each client was asked to give her prime reason for attending that day. We were anxious to evaluate work in relation to health education, but we found it impossible to introduce the questions which would help; we therefore had to preclude this area of work from the enquiry.

Interviews were conducted by the Health Department nursing staff, none of whom had had any experience of this type of work previously. They were not in uniform and we made every effort to ensure that the interviewer was unknown to the mother.

It was decided that:

1. Clients should be interviewed as they left the premises.
2. All questions would be asked without prompting in the first instance, but in the event of bewilderment the examples given on the form for questions 4, 5, 6, and 7 would be read out.
3. To obviate possible bias all the Child Welfare centres and surgeries were designated "A" or "B" at random. "A" session would answer question 5 before 6 and "B" sessions vice versa.

17 sessions were included in the survey for each week, 118 people were interviewed in general practitioners' surgeries and 411 in local health authority sessions, making a total of 529.

The survey shows that the health visitor sessions in general practitioners' premises are little more than immunisation sessions

and that the family consultative functions that we had hoped would develop have failed to materialise, except perhaps to a slight extent. On the other hand, the traditional clinics seem to have continued to function well and be acceptable to the parents, notwithstanding the fact that there is no doctor present and that those requiring medical attention are directed either to the general practitioner or to the public health medical staff for certain assessments, e.g. auditory testing, mental testing, developmental measuring, etc. It would seem, therefore, that much consideration must be given to these services before we are in a position to recommend the best way to use and deploy our depleted medical and nursing power. Clearly we must in the first instance try and discover why the consulting clinics did not develop the way we had hoped.

Clinic Survey.

					Total Numbers	Man Hours
General Practitioners' Surgeries.						
A	....	....	....	....	22	3
B	....	....	....	....	68	10
C	....	....	....	....	3	$\frac{1}{2}$
E	....	....	....	....	12	2
E	....	....	....	....	12	2
F	....	....	....	....	11	2
					<hr/>	<hr/>
Total					146	18
					<hr/>	<hr/>

Local Health Authority Sessions.

Morton Child Welfare Centre	....	....	....	....	34
Oakworth Child Welfare Centre	....	....	....	....	34
Oxenhope Child Welfare Centre	....	....	....	....	37
Victoria Park Child Welfare Centre—Thursday	....	....	....	....	48
Victoria Park Child Welfare Centre—Wednesday	....	....	....	....	64
Skipton Road Child Welfare Centre—Friday	....	....	....	....	44
Skipton Road Child Welfare Centre—Thursday	....	....	....	....	37
Skipton Road Child Welfare Centre—Tuesday	....	....	....	....	27
Haworth Child Welfare Centre	....	....	....	....	86
					<hr/>
Total					411
					<hr/>
Local Health Authority Sessions	....	....	....	....	411
General Practitioners' Surgeries	....	....	....	....	118
					<hr/>
Full Total					529
					<hr/>

Clinic Survey Table 1.
Prime Reason Given by the Parent for Attending the Sessions.

Local Health Authority Session				Health Visitor Session in G.P. Surgeries			
No. of attendances		Percentages		No. of attendances		Percentages	
Immunisation	64	15.6%		86	72.9%		
Social reasons (e.g., meeting other mothers)	8	1.9%		Nil	—		
Advice regarding weaning and child development	103	25.2%		13	11.1%		
Advice regarding weight check	125	30.4%		Nil	—		
Purchasing of food	63	15.4%		Nil	—		
Advice regarding minor defects:							
A. Sore buttocks	8	1.9%		3	2.5%		
B. Teething	6	1.4%		Nil	—		
C. Diarrhoea and vomiting	3	0.7%		Nil	—		
D. Chest conditions	3	0.7%		Nil	—		
E. Others	14	3.4%		4	3.4%		
Advice regarding behaviour problems:							
A. Feeding problems	6	1.4%		3	2.5%		
B. Toilet training	1	0.2%		Nil	—		
C. Temper tantrums	Nil	—		2	1.7%		
D. Others	7	1.8%		3	2.5%		
Problems relating to other members of the family:							
A. Other children	Nil	—		3	2.5%		
B. Parents	Nil	—		1	0.9%		
Total	411	100%		118	100%		

* In the section relating to minor defects "others" included skin, eye defects, minor deformities, enlarged cervical glands, constipation, etc.

* In the section regarding behaviour problems "others" relates to persistent crying, management problems, etc.

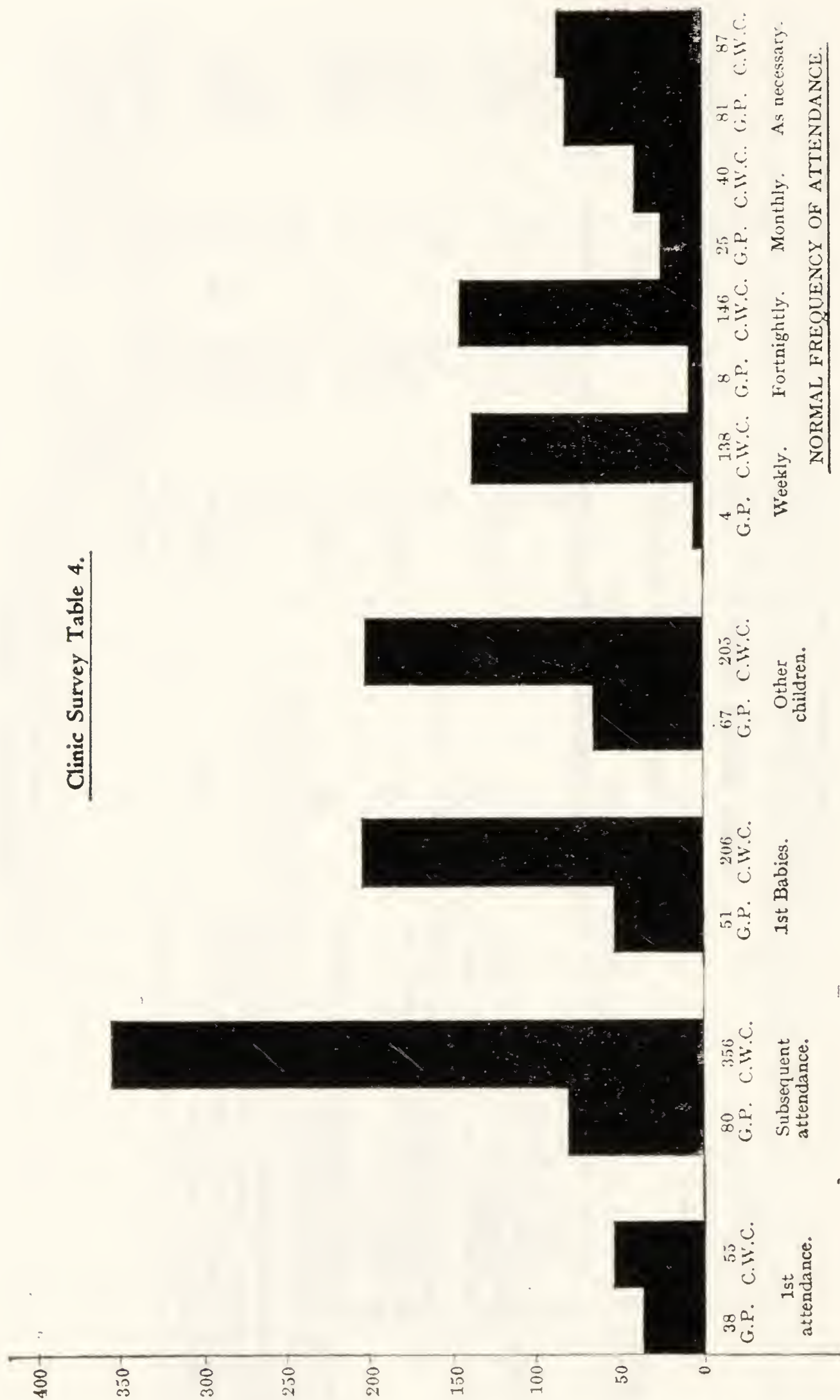
Clinic Survey Table 2.
Analysis of services and advice given.

	In Local Health Centres		Health Visitor Sessions in G.P. Surgeries	
	Number	Percentage	Number	Percentage
Weight check	319	77.6%	Nil	—
Purchase of food	264	64.2%	Nil	—
Immunisation	104	25.3%	86	72.9%
No. of requests regarding progress, weaning or child development	195	47.4%	27	22%
No. who attended for social reasons (i.e., meeting other mothers)	64	15.6%	Nil	—
No. who requested advice regarding:				
A. Sore buttocks	23	5.6%	9	6.2%
B. Teething	33	8.0%	6	5.1%
C. Diarrhoea and vomiting	14	3.4%	2	1.6%
D. Chest Conditions	12	2.5%	5	4.2%
E. Others (including skin, eye conditions, minor deformities)	29	7%	18	15.2%
No. who requested advice regarding behaviour problems:				
A. Feeding	35	8.5%	17	14.4%
B. Sleeping	16	3.8%	3	2.5%
C. Toilet training	7	1.7%	2	1.6%
D. Temper tantrums	3	0.7%	3	2.5%
E. Others, including crying and management problems	12	2.9%	4	3.3%
No. who requested advice regarding themselves or other members of the family:				
(a) Self	6)		5)	
(b) Husband	1)		1)	
(c) School child	1)	2.9%	Nil)	13.5%
(d) Other children	4)		6)	
(e) Parents	—)		4)	
Total Attendances	411		118	

Clinic Survey Table 3.

	Local Health Authority Sessions		Health Visitor Sessions in G.P. Surgeries	
	No. of attendances	Percentages	No. of attendances	Percentages
Number of parents who attended:				
A. Neither purchased food or weighed their children 	57	13.6%		
B. Purchased food or weighed their children but did not seek advice of any kind 	80	19%		
Number of parents who attended for reasons other than immunisation 	307	74.6%	33	27.1%
Duplicate attendances:				
Number of parents who attend both Child Welfare Centres and Health Visitor sessions in G.P. surgeries 	80	19%	44	37.3%

Clinic Survey Table 4.



Clinic Survey.
General Practitioner Family Consulting Session
Questionnaire.

Baby	()
Toddler	()
School	
Child	()
Adult	()

PLEASE TICK IN APPROPRIATE BOXES. *

1. Is this your first attendance?
 Yes (38)
 No (80)
2. Is this your first child?
 Yes (51)
 No (67)
3. Do you normally attend:—
 Weekly (4)
 Fortnightly (8)
 Monthly (25)
 As necessary (81)
4. What were your reasons for attending?
 (a) Immunisation? (86) 86
 (b) Progress advice? e.g., weaning and child
 development care (27) 13
 (c) Social reasons, i.e., meeting other mothers ()
5. Had you any minor defects you wished to discuss?
 (a) Sore buttocks? (9) 3
 (b) Teething? (6)
 (c) Diarrhoea and vomiting? (2)
 (d) Chesty (5)
 (e) Others? (18) 4
 (Please specify).
6. Had you any definite problem regarding this child you
 wished to discuss? If yes, please indicate:—
 (a) Feeding (17) 3
 (b) Sleeping (3)
 (c) Toilet training (2)
 (d) Temper tantrums (3) 2
 (e) Others (4) 3
 (Please specify).
7. Had you any problem regarding either yourself or other
 members of your family you wished to discuss?
 Self (5)
 Husband (2)
 School child ()
 Other children (6) 3
 Parents (3) 1
8. Do you also attend a Local Authority Welfare Centre?
 Yes (44)
 No (74)
 If yes, do you attend:—
 Weekly (14)
 Fortnightly (12)
 Monthly (4)
 As necessary (14)
9. Have you attended a Local Authority Child Welfare
 Clinic this week?
 Yes (21)
 No (97)

Please indicate prime reason given by parent for attending *

Clinic Survey.
Local Health Authority Child Welfare Centre
Form.

Questionnaire.

Baby	()
Toddler	()
School	
Child	()
Adult	()

PLEASE TICK IN APPROPRIATE BOXES.

*

1. Is this your first attendance?

Yes	....	....	....	....	....	....	....	( 55)	
No	....	....	....	....	....	....	....	(356)	
2. Is this your first child?

Yes	....	....	....	....	....	....	....	(206)	
No	....	....	....	....	....	....	....	(205)	
3. Do you normally attend:—

Weekly	....	....	....	....	....	....	....	(138)	
Fortnightly	....	....	....	....	....	....	....	(146)	
Monthly	....	....	....	....	....	....	....	( 40)	
As necessary	....	....	....	....	....	....	....	( 87)	
4. What were your reasons for attending?

(a) To weigh?	....	....	....	....	....	....	....	(319)	125
(b) To buy food?	....	....	....	....	....	....	....	(264)	63
(c) Immunisation?	....	....	....	....	....	....	....	(104)	64
(d) Progress advice (e.g., weaning and child development care)	....	....	....	....	....	....	....	(195)	103
(e) Social reasons (i.e., meeting other mothers)	....	....	....	....	....	....	....	( 64)	8
5. Had you any minor defects you wished to disclose?

(a) Sore buttocks?	....	....	....	....	....	....	....	( 23)	8
(b) Teething?	....	....	....	....	....	....	....	( 33)	6
(c) Diarrhoea and Vomiting?	....	....	....	....	....	....	....	( 14)	3
(d) Chesty?	....	....	....	....	....	....	....	( 12)	3
(e) Others? Please specify	....	....	....	....	....	....	....	( 29)	14
6. Had you any definite problem regarding this child you wished to discuss? If yes, please indicate:—

(a) Feeding	....	....	....	....	....	....	....	( 35)	6
(b) Sleeping	....	....	....	....	....	....	....	( 16)	
(c) Toilet training	....	....	....	....	....	....	....	( 7)	1
(d) Temper tantrums	....	....	....	....	....	....	....	( 3)	
(e) Others. Please specify	....	....	....	....	....	....	....	( 12)	7
7. Had you any problem regarding either yourself or other members of your family you wished to discuss?

Self	....	....	....	....	....	....	....	( 6)	
Husband	....	....	....	....	....	....	....	( 1)	
School child	....	....	....	....	....	....	....	( 1)	
Other children	....	....	....	....	....	....	....	( 4)	
Parents	....	....	....	....	....	....	....	( )
8. Did you also attend G.P. Well Baby Clinic?

Yes	....	....	....	....	....	....	....	( 80)	
No	....	....	....	....	....	....	....	(331)	

If so, do you attend:—

Weekly	....	....	....	....	....	....	....	( 3)	
Fortnightly	....	....	....	....	....	....	....	( 8)	
Monthly	....	....	....	....	....	....	....	( 21)	
As necessary	....	....	....	....	....	....	....	( 48)	
9. Have you attended G.P. Well Baby Clinic this week?

Yes	....	....	....	....	....	....	....	( 14)	
No	....	....	....	....	....	....	....	(398)	

If yes, please indicate:—

(a) For immunisation	....	....	....	....	....	....	....	( 9)	
(b) For advice	....	....	....	....	....	....	....	( 5)	

Please indicate prime reason given by parent for attending *

Health Visitors' Clinic Sessions held in General Practitioners Surgeries.

General Practice	Total No. of Attend-ances	Child Welfare					Un-married Mothers	School Children	Medico Social Prob-lems	Care and After Care	Aged	Total No. of Sessions	Average No. of Attend-ances
		Total No. of Attend-ances	Immun-isation	Advice re Manage-ment	Feeding Prob-lems	Be-haviour Prob-lems							
A	369	326	214	46	71	14	9	13	12	2	7	48	7
B	138	122	102	11	8	1	—	13	1	2	—	42	3
C	108	108	83	25	—	—	—	—	—	—	—	52	2
D	746	620	481	262	331	191	7	83	35	10	—	50	14
E	546	499	366	134	57	6	1	14	12	14	4	50	10
F	369	367	230	23	26	76	—	—	1	2	—	45	7
G	65	49	41	7	6	—	1	—	11	1	—	29	2
H	156	141	134	23	19	2	—	12	1	—	—	14	11
Total	2497	2232	1651	531	518	290	18	135	73	31	11	330	56

Home Nursing

(Section 25, National Health Service Act, 1946).

The total number of visits made by the home nursing staff during 1966 was 21,344, approximately 2,000 less than in the previous year, mainly due to staffing difficulties. 1,065 cases were treated, of which 122 were patients requiring dressings and 11 were children under the age of 15 years. This shows an increase of approximately 100 patients more than in 1965 and a 100 per cent. increase in patients requiring dressings. The number of young children treated has not increased. The increase in the number of patients requiring dressings encourages us to believe that the home nursing service, which is badly in need of revitalisation, is at last attracting more acute work to itself. We are convinced that this service has a valuable contribution to make to the modern needs of community care, but in order to do this a great deal of reorganisation must take place and we must discard traditional attitudes which are outmoded.

We believe that in recent years the S.R.N. in this service has not had the opportunity to practise all her skills; conversely, she has been compelled to carry out many nursing procedures which could well be delegated to other workers. We are now therefore employing state enrolled nurses and nursing auxiliaries on a part-time basis in the hope that we shall eventually be able to establish a team of workers consisting of an S.R.N. as team leader supported by an S.E.N. and nursing auxiliary. In this setting, the S.R.N. would assess each new case, carry out nursing duties which required her skill and delegate cases to the S.E.N. which she is particularly suited to deal with. In addition, both grades of trained nurses are supported by a nursing auxiliary who is able to give excellent care to patients in need of simple nursing procedures, especially to the aged. The S.R.N., therefore, will be free to spend more time with those cases which require her attention; to supervise the staff and maintain contact with the general practitioner, who would consequently be encouraged to refer more work to her by the two way exchange of information which would take place. The home nursing staff now hold three out patient clinics in general practitioners' surgeries and one on local authority premises, details of which are set out in the following table. One group of three doctors has a weekly session of approximately one hour, a second group of five doctors has three short morning sessions per week. The clinic, on local health authority premises, functions twice weekly and one of these is held at 5 p.m. for the benefit of patients who are working. The sessions are short and the type of patient referred are usually those for injections, dressings, removal of sutures and ear syringing, etc. The day and night nursing service continues to increase, and this year twenty-five cases were covered, of which five were malignancies.

**Clinic Sessions held in General Practitioners' Surgeries and
Local Authority premises.**

	Total No. of Attendances	Dressings	Injections	Removal of Sutures	Ear Syringing	Sessions per week
A	260	2	260	—	—	1
B	132	6	125	1	—	1
C	173	62	111	—	—	1
D	94	1	73	—	18	2
<hr/>						
Total	659	71	569	1	18	5

Vaccination and Immunisation

(Section 26, National Health Service Act, 1946).

During the year 895 children received a primary course of immunisation against diphtheria, and in addition 746 children were given booster doses. The number of children vaccinated against whooping cough during the year was 887 and 102 received booster doses. 1,197 persons received a course of protective treatment against poliomyelitis during the year, and 714 booster doses were given. 436 vaccinations and 33 re-vaccinations against smallpox were performed, which represents only a very small proportion of the child population. Further details regarding the number of children who received primary courses of protective treatment or booster doses against diphtheria, whooping cough, tetanus, poliomyelitis and smallpox will be found in the appendix.

Prevention of Illness, Care and After Care.

(Section 28, National Health Service Act, 1946).

Tuberculosis. Dr. W. D. Hamilton, Chest Physician.

During the year there has been a decline in the number of new notifications of tuberculosis compared with 1965 and 1964 respectively. However, these represent a considerable decrease on the numbers for 1963:—

1963	1964	1965	1966
50	28	30	18

Seven new cases were immigrants; in previous years, especially in 1963, the majority of new cases were found to be immigrants.

Three new cases were found to have infectious sputa; altogether eight patients produced positive sputa during the year. There are five cases on the resistant register; they remain reasonably well isolated and have not been the cause of spread of infection.

Compared with previous years, attendances at the clinic show little change:—

1963	1964	1965	1966
1661	1472	1373	1397

All mantoux positive school leavers are seen at the chest clinic and those with severe reactions are kept under observation for a period of time. Two immigrant children were found to have active primary lesions necessitating treatment; one had a period of treatment in hospital; the other was put on chemotherapy at home. Two other immigrant children remain under observation at the chest clinic. Altogether, 36 immigrant children found to be mantoux positive were seen during the year.

All contacts of known cases are seen and B.C.G. vaccination is offered in the case of all Mantoux positive children. A good number of those vaccinated with B.C.G. during the year were young babies:—

Number of contacts seen	....	....	187
Number of Mantoux tested	....	....	65
Number found positive	....	....	25
Number found negative	....	....	40
Number vaccinated with B.C.G.	....		55

There are few cases of unemployment amongst tuberculosis patients and the liaison between the Ministry of Labour, the Ministry of Social Security and the Chest Clinic remains exceptionally good.

There is no Care Committee operating in Keighley. All difficulties which arise are dealt with at the chest clinic, with the valuable assistance of the health visitors.

Tuberculosis, Extra Nourishment. Extra nourishment, in the form of liquid milk, is provided free of charge to tuberculous patients on the recommendation of the Chest Physician. During the year 89 orders were issued, each covering a maximum period of two months.

Health Education.

1. **Mothercraft and Relaxation Classes.** There are now three classes held in general practitioners' premises for the benefit of practice patients only. They are all well attended. The classes, however, can only be held in group practice since we must have a suitable room, and in addition the practice must be large enough to ensure the attendance of six to eight mothers in order that they may benefit from group teaching. The classes on local health authority premises and at St. John's Hospital continue to be well attended.

2. **Venereal Diseases.** We continue to display posters relating to this subject in public conveniences, general practitioners' surgeries and hospital casualty departments. It is also a subject for discussion in specially selected groups in schools.

3. **Home Safety.** At the Keighley Gala a float was erected by a class of boys from Eastwood Secondary School. The Home Safety Essay Competition for schools was again organised and 884 children entered from 17 schools. This yearly effort is very undramatic, but it involves the staff in an enormous amount of work in that the majority of the children are given some instruction prior to the essay writing. The success of the competition is mainly due to the enthusiasm of both teaching and health visiting staff.

4. Smoking and Health. Posters on this subject have been displayed in schools, public libraries, general practitioners' surgeries, hospitals, and child welfare centres at regular intervals. Health visiting staff continue to include this subject in their routine health education programme in schools and try to concentrate on the 10-11 year old so that the children have some knowledge of the adverse effects of smoking on health before they enter secondary schools.

5. Schools. We continue with the routine health education programme in schools, and although the staff are under pressure of work from all directions, they make every attempt to maintain their health education commitments. We find that teachers are increasingly interested in the subject and that more useful discussion takes place in relation to the content of the syllabus, new subjects being introduced at their request or when the need arises.

Loan Equipment. A variety of loan equipment is held in store and items are available on request from the general practitioner in charge of the case or health visitor or home nursing sister. The loan equipment is issued free of charge, but applicants are required to sign an undertaking to return the articles in good condition and to pay for any article which is lost or damaged whilst in their care. The service has and continues to be greatly appreciated.

Laundry Facilities for Incontinent Patients. The laundry service is now well established, and one which is much appreciated. It continues to support the efforts of nursing staff and relatives under stress, and in addition, must, to some extent, relieve pressure on hospital beds. During the year we have provided these facilities for some forty-eight cases and incontinent pads to a further 140 cases. Where possible the soiled pads are disposed of by the householder on the domestic fire; in all other cases they are collected and burnt on the hospital incinerators.

Convalescent Home Treatment. Arrangements for admission of certain patients to convalescent homes are made on the receipt of a request from the patient's general practitioner. Each patient is assessed to contribute towards the cost in accordance with a scale of charges approved by the County Council.

Children Neglected or Ill-treated in their Own Homes. Four meetings of the Co-ordinating Committee were held during the year, with an average attendance of 13. At these meetings 13 new cases, involving 47 children, were discussed, together with current and follow-up reports on earlier cases.

Apart from the meetings already referred to, work with these facilities involves much discussion, not only among the health

department staff but with other departments who are concerned to a greater or lesser extent with the same families.

The rent guarantee scheme continued to function satisfactorily and at the end of the year there were twelve families, involving 62 children, who were the subject of such guarantees. Naturally these guarantees require an extremely close liaison between the Health and Housing Departments, and this we have constantly had.

Chiropody Treatment. The Authority's scheme, which was first introduced in this area in 1961, provides for free treatment to be given to men over 65 years of age, women over 60 years of age, the physically handicapped and expectant mothers, the physically handicapped being regarded as those persons who are suffering from a disability directly associated with the need for chiropody treatment or which prevents a person attending to his own feet.

At the outset, taking the findings of the National Corporation for the Care of Old People as a guide and judging from the experience from some of the larger voluntary organisations in the West Riding County Council's administrative area who had been operating a service for some years, it was thought that the scheme would eventually need to provide for treatment for some 15 to 20 per cent. of the aged.

Domiciliary treatment should only be approved where a patient is housebound and unable to attend a Centre or Clinic.

The need or otherwise to provide domiciliary treatment on medical grounds has received close attention, as this method of treatment is much more costly than treatment at a centre or chiropodist's premises. Any proportion over 20 per cent. must be regarded with reserve, as the natural assumption would be that, if the experience gained in the Chiropody Service is any guide, then something like a quarter of the aged population as a whole is housebound.

With regard to frequency of treatment, the approved scheme provides for six treatments in a period of twelve months, but additional treatment can be authorised if considered necessary, after consultations with any particular chiropodist.

The service has so far continued to provide since its inception for the treatment of an ever-increasing number of patients. An examination of the numbers of patients provided with treatment in the last five years shows that a total number of 1,613 patients were provided with treatment in 1963, 2,237 in 1964, 2,562 in 1965 and 2,719 in 1966. Of the 2,719 patients treated during the year 1966, 2,702 were in the aged category, which represents some 28.5 per cent. of the estimated population of men over 65

years of age and women over 60, compared with 46,359, 45,316 and 18 per cent. respectively in respect of the West Riding County Council's administrative area as a whole.

Cervical Cytology. During the year 59 sessions were held in the Skipton Road Clinic. At these 1,397 patients were examined. 14 smears were found to be positive. These patients were referred to their general practitioner with a view to their being seen by the Consultant Gynaecologist and treated appropriately.

Domestic Help

(Section 29, National Health Service Act, 1946).

The Domestic Help Service continued during the year to assist people in their own homes who are either sick or so frail as to be unable to carry out the necessary domestic duties such as cleaning, cooking, etc. The staff employed consisted of the equivalent of 43 full-time home helps, an increase of 3 on the previous year, who in all attended a total of 680 cases, an increase on the previous year of 42. Further details of the work done will be found in the appendix.

Mental Health Service

(Section 28, National Health Service Act, 1946.
Mental Health Act, 1959).

The increased national demand for improved psychiatric services are reflected in the additional provisions which have been available during the year 1966. Indeed, the developments envisaged for 1967 and the years ahead indicate that a full range of out-patient, domiciliary, hospital, hostel and special treatment units will be available. Extensive building and upgrading of existing accommodation at both Scalebor Park Hospital and High Royds Hospital now provide accommodation for patients in the acute phase of illness with a very high standard of care and attention. A new admission and treatment unit will be available at Scalebor Park Hospital during 1967, which will provide a service of a very high order. Developments for the future at the proposed Eastburn Hospital will incorporate plans for the treatment of psychiatric patients and thus provide a service much nearer geographically to the Borough.

During the year Dr. Marshall has taken up his appointment in the area as a Consultant Geriatrician, and close liaison between Dr. Marshall and the staff of the Department has helped to improve the services for the psycho-geriatric patient.

As will be noted from the statistical details in the appendix, the number of referrals from all sources continues to increase. The social workers in the department are co-operating closely with such workers in the many and varied social service departments, to the betterment of the patient's total welfare and that of the patient's family, to any changed circumstances which may ensue as a result of illness.

Every endeavour is made to promote direct consultation between general practitioner and the psychiatrist. Nevertheless, the social worker in the field has a contribution to make in relation to the environment of the patient and can help towards a closer and fuller understanding of the patient and the social implications of his illness.

Nursery and Child Minders Regulation Act, 1948.

The Day Nursery, Granby Lane, Riddlesden, which provides accommodation for 45 children in the 2 to 5 age group, is registered by the Authority under the above Act. Similarly, the Nurseries provided by I. and I. Craven and Co. Ltd., Dalton Mills, Keighley, and Miss K. Fitzpatrick, Temperance Hall, Keighley, provide accommodation for 40 and 15 children respectively, are also registered. In addition, the Authority has a registered Daily Minder for the care of up to a maximum of 15 children and also another Daily Minder for the care of up to a maximum of 6 children.

Welfare of Handicapped Persons

In order to assist handicapped persons living in their own homes, a number of conversions and adaptations to property have been carried out. There are now several houses which have been specially adapted for handicapped persons, and if it was ever necessary for them to be re-let, priority would be given to rehousing some other handicapped person there. It is hoped that specially designed houses for handicapped persons will be built in the future and that further measures will be taken to secure that the handicapped persons will be able to lead as normal a life as possible. Further details regarding Blind and Partially Sighted Persons will be found in the appendix.

General Medical, Pharmaceutical, Dental and Supplementary Ophthalmic Services.

There is constituted for the area of every Local Health Authority an Executive Council for the purpose of exercising the General Medical, Pharmaceutical, Dental and Supplementary Ophthalmic Services. Since the 5th July, 1948, every man, woman and child has been entitled to general medical care, to all

necessary medicines and certain appliances, to dental care and to be supplied with spectacles if such are needed. Certain charges to patients have been prescribed for dental and ophthalmic services.

General Medical Services.

Everyone can choose his or her own doctor if the doctor is taking part in the scheme and is willing to accept the applicant. It is important to note that a doctor, although he may be participating in the scheme, is not compelled to accept every person who applies to be included in his list. He is at liberty to refuse anyone whom he does not desire to accept.

Persons who are not on a doctor's list must complete Form E.C.1 (rev.), which they can obtain from the doctor or the Executive Council. The form, when completed, should be handed to the doctor chosen by the applicant. If a doctor is, for any reason, unable to accept a patient, he will give such treatment, if any, as is necessary pending acceptance by another doctor. He will inform the patient of the names and addresses of other local doctors, and if, following approaches to those doctors, the patient is still unable to secure acceptance, he should write to the Executive Council.

The doctor who accepts the case will send the form to the Executive Council, who will later send a medical card to the applicant.

A person is at liberty to change his doctor at any time; to do this he uses his "medical card." Change may be effected either by giving to the Executive Council fourteen days' notice of intention to transfer; or immediately, provided that the written consent of the existing doctor is obtained thereto, or he has moved to an address differing from that shown on his medical card.

When away from home, treatment can be obtained temporarily from any doctor who is taking part in the National Health Service, but a person leaving his home district should take care to carry his medical card, so that he may be able to produce it to the doctor temporarily selected. In these circumstances, he should not leave his card with the doctor.

An expectant mother can have the services of a general practitioner obstetrician, whether he is her usual doctor or not. If her usual doctor does not undertake maternity work, she may apply to any doctor who undertakes these services, such doctors being indicated in the Medical List by "M". It will be for the doctor who accepts the case, with a midwife, to give all the proper care and attention to the patient, and unless circumstances prevent it, to be present at the confinement.

Pharmaceutical Services.

Doctors will give their patients prescriptions for any medicines and drugs which they need. Doctors may also prescribe for their patients certain necessary appliances.

The prescriptions for medicines, drugs and appliances may be taken to be dispensed to any chemist taking part in the scheme.

In some country areas the doctor himself will dispense the prescription.

Dental Services.

Dental services are available to everyone and persons may apply for treatment to any dentist who is taking part in such arrangements. No application form is needed, but the patient should supply the dentist with his National Health Service number.

Supplementary Ophthalmic Services.

A person wishing to make use of this service for the first time will get a recommendation from his doctor that his eyes need testing. He will hand this recommendation to any ophthalmic doctor or to any ophthalmic optician taking part in the scheme and ask to have his eyes tested. If the test shows that glasses are needed these will be provided subject to payment by the patient of prescribed charges towards the cost involved.

APPENDIX

Notifiable Infectious Diseases.

Numbers of all cases of infectious and other notifiable diseases originally notified during the year, and of the final numbers according to sex and age, after corrections subsequently made either by the Notifying Medical Practitioner or by the Medical Superintendent of the Infectious Diseases Hospital.

	Scarlet fever		Whooping cough		Acute Poliomyelitis		Measles (excluding rubella)		Diphtheria		Menin- gococcal infection	
	M. F.	M. F.	M. F.	M. F.	Para- lytic	Non-Para- lytic	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
Number originally notified (All Ages)	16	13	15	14	—	—	176	161	—	—	3	1
Final numbers after correction:												
Under 1	—	—	3	1	—	—	2	8	—	—	—	—
1 year	—	—	—	1	—	—	28	26	—	—	1	—
2 years	2	—	2	4	—	—	23	20	—	—	—	—
3 years	2	3	1	2	—	—	41	30	—	—	—	—
4 years	4	3	1	2	—	—	23	28	—	—	—	—
5—9 years	7	3	6	2	—	—	50	45	—	—	—	—
10—14 years	1	3	1	1	—	—	3	2	—	—	—	1
15—24 years	—	1	—	—	—	—	1	—	—	—	—	—
25 and over	—	—	—	—	—	—	1	—	—	—	—	—
Age Unknown	—	—	—	—	—	—	4	2	—	—	—	—
Total (All Ages)	16	13	14	13	—	—	176	161	—	—	1	1

Ac. Pneumonia Smallpox		Acute encephalitis Post Infectious		Enteric & Typhoid fever	Para- typhoid fever	Erysipe- las	Food poisoning
M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
<hr/>							
Number originally notified:	2 3	— —	— —	— —	— —	1	2 3
(All Ages) ....	....	....	....	....	....	....	....
<hr/>							
Final numbers after correction.							
Under 5 years	1 —	— —	— —	— —	— —	1	— —
5—14 years	— —	— —	— —	— —	— —	— —	— —
15—44 years	— 1	— —	— —	— —	— —	— —	— —
45—64 years	1 1	— —	— —	— —	— —	— —	— —
65 and over	— —	— —	— —	— —	— —	— —	— —
Age Unknown	— —	— —	— —	— —	— —	— —	2 3
<hr/>							
Total (All Ages)	2 2	— —	— —	— —	— —	1	2 3

Total of new cases coming to the knowledge of Medical Officer of Health otherwise than by formal notification.

Age Group	Tuberculosis				Males		Females	
	Respiratory		Meninges and C.N.S.		M.	F.	M.	F.
Numbers originally notified	...	14	1	—	—	—	2	1
Total (All Ages)	...	14	1	—	—	—	2	1
Final numbers after correction:								
Unde 1 year	...	—	—	—	—	—	—	—
1 year	...	—	—	—	—	—	—	—
2—4 years	...	—	—	—	—	—	—	—
5—9 years	...	1	1	—	—	—	—	—
10—14 years	...	1	—	—	—	—	—	—
15—19 years	...	2	—	—	—	—	—	—
20—24 years	...	1	—	—	—	—	—	—
25—34 years	...	2	—	—	—	—	—	—
35—44 years	...	1	—	—	—	—	—	—
45—54 years	...	3	—	—	—	—	—	—
55—64 years	...	2	—	—	—	—	—	—
65—74 years	...	1	—	—	—	—	—	—
75 and over	...	—	—	—	—	—	—	—
Age Unknown	...	—	—	—	—	—	—	—
Total (All Ages)	...	14	1	—	—	—	—	—

Other Notifiable Diseases.			
Original		Final	
M.	F.	M.	F.
Puerperal Pyrexia			
—	3	—	3
Ophthalmia Neonatorum			
—	—	—	—
Anthrax			
—	—	—	—

Number of Primary Notifications of new cases of Tuberculosis.

Formal Notifications.

Age Periods	0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	Total (all ages)
Respiratory Males	—	—	—	1	1	2	1	2	1	3	2	1	—	14
Respiratory Females	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Non-Respiratory Males	—	—	—	—	—	—	—	2	1	—	—	—	—	3
Non-Respiratory Females	—	—	—	—	—	—	—	—	1	—	—	—	—	1

New Cases found other than by Formal Notification.

Age Periods	0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	Total (all ages)
Respiratory Males	—	—	—	—	—	—	—	—	—	1	—	1	—	2
Respiratory Females	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Non-Respiratory Males	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-Respiratory Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—

CARE OF MOTHERS AND YOUNG CHILDREN.

Child Welfare Centres.

Particulars of Clinics held, showing day, time and frequency of sessions and staff in attendance, as at 31st December, 1966.

Premises	Antenatal	Infant Welfare	Cervical Cytology
Haworth Station Road Surgeries	Wednesday p.m. M. Relax	Tuesday p.m. HV (3)	
Keighley Mansion House, Victoria Park (Phone: Keighley 2244/5)	Tuesday, p.m. M. Relax	Wednesday p.m. Thursday p.m. HV (3)	
Keighley 143, Skipton Road (Phone: Keighley 2244/5)	Wednesday p.m. M. Relax	Tuesday p.m. Thursday p.m. Friday p.m. HV (2)	Tuesday a.m. Friday a.m. GP/M/HV
Morton Memorial Institute, East Morton	—	Friday p.m. (alternate) HV (2)	
Oakworth Holden Hall	—	Monday p.m. (alternate) HV (2)	
Oxenhope Methodist Sunday School	—	Monday p.m. (alternate) HV (2)	

NOTE—The following abbreviations are used.

GP.—General Practitioner.

HV—Health Visitor and/or School Nurse.

M.—Midwife.

Relax.—Relaxation Exercise Clinic.

Ante-Natal and Post-Natal Clinics.

Name and address of Ante-natal/ Post-natal Clinic (whether held at Infant Welfare Centre or other premises)	Number of separate sessions held during year					No. of women in attendance (including those seen at com- bined infant welfare and ante-natal sessions)	Total No. of attendances (including those seen at combined infant welfare and ante-natal sessions)		
					Total				
	Local Health Authority Medical Officers	Midwives (excluding mother- craft and relaxation)	General practi- tioners employed on sessional basis	Hospital medical staff					
(1)	(2)	(3)	(4)	(5)	(6)	Ante-natal (7)	Post-natal (8)	Ante-natal (9)	Post-natal (10)
Westgate C.W.C., Oakworth Road, Keighley	1	—	—	1	1	—	1	—
Remarks:—Closed 5th April, 1966.									

Remarks:—Closed 5th April, 1966.

Ante-Natal, Mothercraft and Relaxation Classes.

Name and Address of Centre	No. of sessions held during the year		No. of women who attended during the year			Total number of attendances made during the year		
	Separate sessions (2)	Combined with normal ante-natal clinic sessions (3)	Institutionally booked (4)	Domiciliary booked (5)	Total (6)	Institutionally booked (7)	Domiciliary booked (8)	Total (9)
(1)								
Haworth C.W.C., Station Road Surgeries, Haworth, Keighley	35	—	21	2	23	113	15	128
Victoria Park C.W.C., The Mansion House, Victoria Park, Keighley	44	—	24	1	25	154	9	163
The Clinic, 143, Skipton Road, Keighley	72	—	47	10	57	300	87	387
Totals	151	—	92	13	105	567	111	678

Remarks:—Transferred from Westgate C.W.C., 13th April, 1966.

Remarks:—Transferred from Westgate C.W.C., 13th April, 1966.

Infant Welfare Centres.

Name and Address of Centre	No. of infant welfare sessions held during year by				Total	No. of children who attended for the first time during the year and who were born in				Total No. of children who attended during the year	No. of attendances during the year made by children who were born in			Total attendances during the year	No. of children referred elsewhere							
	Local Health Authority Medical Officers	Health Visitors only	General practitioners employed on sessional basis	Hospital Medical Staff		(2)	(3)	(4)	(5)		(6)	(7)	(8)			1960-1964 (9)	(10)	1966 (11)	1965 (12)	1960-1964 (13)	(14)	(15)
Haworth C.W.C., Station Road Surgeries, Haworth, Keighley	2	46	—	—	48	73	66	98	237	696	828	880	2404	24								
Morton C.W.C., The Memorial Institute, Morton, Keighley	—	25	—	—	25	42	32	15	89	252	204	522	978	4								
Oakworth C.W.C., Holden Hall, Oakworth, Keighley	—	24	—	—	24	24	32	45	101	258	304	228	790	10								
Oxenhope C.W.C., Methodist Sunday School, Oxenhope, Keighley	—	24	—	—	24	25	38	28	91	201	194	305	700	3								
Victoria Park C.W.C., The Mansion House, Victoria Park, Keighley ...	—	104	—	—	104	167	154	148	469	1782	1937	1307	5026	68								
†Westgate C.W.C., Oakworth Road, Keighley ...	14	12	—	—	26	50	125	90	265	208	599	259	1056	19								
*The Clinic, 143, Skipton Road, Keighley	—	106	—	—	106	225	50	75	350	2073	720	698	3491	3								
	16	341	—	—	357	606	497	499	1602	5470	4786	4199	14455	131								

Remarks:—† Closed 7th April, 1967. *Commenced 15th April, 1967.

The Care of the Unmarried Mother and Her Child.

			West Riding Cases	Non- County Cases	Total
(1) Number of cases dealt with during the year:					
(a) Referred by Moral Welfare Organisations			11	—	11
(b) Ascertained through own staff (midwives, etc.) ....	....	....	20	—	20
(c) Referred by other services ...	...	...	41	—	41
Totals ...	...	...	72	—	72
(2) Analysis:					
Married:					
With previous illegitimate children ....	....	....	4	—	4
Without previous illegitimate children ....	....	....	4	—	4
Single:					
With previous illegitimate children ...	...	...	21	—	21
Without previous illegitimate children ....	....	....	34	—	34
Widowed or Divorced:					
With previous illegitimate children ....	....	....	6	—	6
Without previous illegitimate children ....	....	....	3	—	3
Totals ....	....	....	72	—	72
(3) Ages:					
Under 15 ....	....	....	—	—	—
15—19 ....	....	....	29	—	29
20—24 ....	....	....	19	—	19
25—29 ....	....	....	12	—	12
30—39 ....	....	....	8	—	8
40 and over ....	....	....	4	—	4
Totals ....	....	....	72	—	72
(4) Disposal:					
Cases settled:					
Marriage ....	....	....	—	—	—
Baby died ....	....	....	4	—	4
Grandparents to take baby home ....	....	....	—	—	—
Baby adopted ...	....	....	3	—	3
Baby fostered ....	....	....	11	—	11
Mother keeping baby ....	....	....	54	—	54
Cases referred elsewhere ....	....	....	—	—	—
Cases in which action has been taken but not finally settled ....	....	....	—	—	—
Totals ....	....	....	72	—	72

Phenylketonuria Testing.

(1) Number of babies tested by Health Visitors:

(a) During the fourth week of age or under	....	....	919
(b) Over four weeks but less than six weeks	....	....	48
(c) Six weeks of age or over	....	....	4
Total	....	....	970

(2) Result of Test:

(a) Negative	....	....	....	....	....	....	968
(b) Positive	....	....	....	....	....	....	2
(c) No. of (b) confirmed as positive on serum testing at hospital laboratory	....	....	....	....	....	....	2

Day Nurseries.

Name of Nursery	No. of approved places		No. of children on Register at 31st Dec.		Average daily attendance		Approved for training	
	0—2 years of age	2—5 years of age	0—2 years of age	2—5 years of age	0—2 years of age	2—5 years of age	training	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
Oakworth Road Day Nursery	25	25	11	38	9.57	26.99	0—5

DOMICILIARY MIDWIFERY.

Employment of Midwives.

Number of Midwives practising in the area of the Local Supervising Authority at the end of year

(1)	Domiciliary Midwives	Midwives in Institutions	Total
(1)	(2)	(3)	(4)
(a) Midwives employed by the Authority	4	—	4
(b) Midwives employed by Voluntary Organisations (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	21	21
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)			
Totals	4	21	25

Care of Premature Infants.

Premature live births															Premature stillbirths
Weight at birth	Born in hospital		Born at home or in a nursing home										Born at home or in a nursing home (14)		
	Total births (1)	within 24 hours of birth (2)	in 1 and under 7 days (3)	in 7 and under 28 days (4)	Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day					Born	
					Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)			
															Total births (13)
1. 2 lb. 3 oz. or less	1	1	—	—	—	—	—	—	—	—	—	—	—	—	
2. Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	5	—	2	—	—	—	—	—	—	—	—	—	—	3	—
3. Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	10	—	—	—	—	—	—	—	—	—	—	—	—	3	—
4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	14	—	—	—	1	—	—	—	—	—	—	—	—	4	—
5. Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	34	—	1	—	1	—	—	—	—	1	—	—	—	1	—
6. Totals	64	1	3	—	2	—	—	—	—	1	—	—	—	11	—

1. = 1,000g. or less. 2. = 1,001-1,500g. 3. = 1,501-2,000g. 4. = 2,001-2,250g. 5. = 2,251-2,500g.

Deliveries Attended by Midwives.

Number of Deliveries Attended by Midwives in the Area during the year

Employment of Midwives		Domiciliary Cases				Cases in Institutions	
		Doctor not booked		Doctor booked			
		Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child (either the booked doctor or another)	Doctor not present at time of delivery of child	Totals	
		(2)	(3)	(4)	(5)	(6)	(7)
(a)	Midwives employed by the Authority	—	1	5	66	72	—
(b)	Midwives employed by Voluntary Organisations (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—	—	—	—
(c)	Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	—	—	—	1401
(d)	Midwives in Private Practice (including Midwives employed in Nursing Homes)	—	—	—	—	—	—
Totals		—	1	5	66	72	1401
(e) Number of cases delivered in institutions but attended by domiciliary midwives on discharge from institutions:—							
(i) At forty-eight hours		....	....	....	....	....	40
(ii) After forty-eight hours, up to and including the fifth day		....	....	....	....	....	315
(iii) After the fifth but before the tenth day		....	....	....	....	....	286
Total		....	....	....	....	....	641
(f) Obstetric Flying Squad—No. of occasions/services called upon during year		....	....	....	....	....	—

Medical Aids, etc.

The following statutory notices, under the Midwives Act, 1951, were received from midwives during the year:—

(1) Death of (a) Mother	....	....	....	....	....	....	1
(b) Child	....	....	....	....	....	....	16
(2) Stillbirths	....	....	....	....	....	....	28
(3) Liability to be a source of infection	....	....	....	....	....	....	4

Medical Aid Notices:

Issued for:		No. Issued because of complications arising in/during			
(1)		Preg-nancy (2)	Labour (3)	Lying-in (4)	The Child (5)
(a) Domiciliary Cases:					
(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service Act		—	3	3	—
(ii) Others		—	—	—	—
(b) Cases in Private Nursing Homes:					
(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service Act		—	—	—	—
(ii) Others		—	—	—	—
(c) Cases in Institutions		—	—	—	—
(d) Totals		—	3	3	—

The following is a summary of the 6 medical aid notices issued by midwives during the year:—

Labour.

	Domiciliary	Institu-tional	Total
Labour—delayed	1	—	1
Laceration—perineal	1	—	1
Uterine inertia	1	—	1

Lying-In.

Femoral embolism	1	—	1
Pyrexia	2	—	2

Administration of Inhalational Analgesics.

(1) Institutional Midwives.

Number of Institutional Midwives in practice in the area at the end of the year qualified to administer inhalational analgesics in accordance with the requirements of the Central Midwives Board:—

(a)	Employed in homes and hospitals in the National Health Service	21
-----	--	------	------	------	------	------	------	----

(b) Employed in nursing homes or in maternity homes and hospitals not in the National Health Service —

Total	21
-------	------	------	------	----

County Council Staff	Independent Midwives
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20
21	21
22	22
23	23
24	24
25	25
26	26
27	27
28	28
29	29
30	30
31	31
32	32
33	33
34	34
35	35
36	36
37	37
38	38
39	39
40	40
41	41
42	42
43	43
44	44
45	45
46	46
47	47
48	48
49	49
50	50
51	51
52	52
53	53
54	54
55	55
56	56
57	57
58	58
59	59
60	60
61	61
62	62
63	63
64	64
65	65
66	66
67	67
68	68
69	69
70	70
71	71
72	72
73	73
74	74
75	75
76	76
77	77
78	78
79	79
80	80
81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

(2) Domiciliary Midwives.

(a) Number of Domiciliary Midwives in the area who at 31st December were qualified to administer inhalational analgesics:—

(i) Gas and air	....	4	—
(ii) Trilene	....	4	—

(b) Number of sets of apparatus for the administration of inhalational analgesics in use (or held in reserve) at 31st December:—

(i)	Gas and air	....	1	—
(ii)	Trilene	....	4	—
	Pethi- dine Alone	Gas and Air With Pethi- dine	Trilene With Pethi- dine	

(c) Number of cases where analgesia was administered by County Council midwives, including those whose services have terminated during the year

6 — — 12 51

(d) Number of cases where analgesia was administered by Independent midwives during the year







HEALTH VISITING.

Cases visited by health visitors				No. of cases (i.e., first visits)	Total visits including first visits but excluding ineffective	Ineffec- tive visits
				(1)	(2)	(3)
1.	Children born in 1966	....	....	980	4247	586
2.	Children born in 1965	....	...	1007	3662	477
3.	Children born in 1961-1964	....	....	1527	6114	548
4.	Total number of children in lines 1-3			3514	14023	1611
5.	Persons aged 65 or over (excluding "domestic help only" visits)	....		959	2970	224
6.	Number included in line 5 who were visited at the special request of a general practitioner or hospital			650	—	—
7.	Mentally disordeded persons	....		69	220	21
8.	Number included in line 7 who were visited at the special request of a general practitioner or hospital			33	—	—
9.	Persons, excluding maternity cases, discharged from hospital (other than mental hospitals)	....	....	481	806	46
10.	Number included in line 9 who were visited at the special request of a general practitioner or hospital			172	—	—
11.	Number of tuberculous households visited (i.e., visits by health visitors not employed solely on tuberculosis work)	....	....	130	277	53
12.	Number of households visited on account of other infectious diseases	....	....	92	501	2
13.	Number of tuberculous households visited by tuberculosis visitors (i.e., employed <i>solely</i> on tuber- culosis work)	....	....	—	—	—

Clinics held in General Practitioners' Surgeries by Public Health Nursing Staff.

			No. of weekly sessions	No. of Nursing Staff	No. of G.Ps. covered
Ante-natal Clinic (Midwives) ....	....		11	4	16
Mothercraft and Relaxation Clinics (Midwives and Health Visitors) ....	....	....	3	3	8
Family Consulting Sessions (Health Visitors) ....		....	8	8	14
Out-patient Clinic (Home Nursing Sisters)....			5	4	9

Ante-Natal Sessions held in General Practitioners' Surgeries.

General Practice	Total No. of Attend- ances	No. of G.Ps. covered	No. of Attend- ances by Domi- ciliary Booking	No. of Attend- ances by Hospital Booking	Total No. of Sessions	Sessions Per Week	Average No. of Attend- ances
A	429	1	28	401	41	1	10
B	216	2	16	200	41	1	5
C	99	1	—	99	40	1	2
D	134	1	4	130	35	1	3
E	246	1	28	218	43	1	5
F	255	3	43	212	50	1	5
G	1128	2	309	819	41	1	23
H	680	2	59	621	67	2	10
I	190	1	8	182	28	1	6
J	367	1	28	339	45	1	8
K	244	1	4	240	44	1	5
Total	3988	16	527	3461	475	12	8

HOME NURSING.

Classification						No. of cases attended by Home Nurses during the year	No. of visits paid by Home Nurses during the year
(1) Medical	....	...	....	....	....	904	18387
(2) Surgical	....	....	....	....	....	102	2582
(3) Infectious Diseases			....	....	....	2	44
(4) Tuberculosis		....	....	....	....	9	263
(5) Maternal complications			....	..	...	7	66
(6) Other	....	....	....	....	....	1	2
Totals						1065	21344
Patients included above who were aged 65 or over at the time of the first visit during the year						670	14529
Children included above who were under 5 years of age at the time of the first visit during the year						5	55
Patients included above who have had more than 24 visits during the year						240	14608

PREVENTION OF ILLNESS, CARE AND AFTER CARE.

Tuberculosis—Extra Nourishment.

(a) Number of patients receiving extra nourishment on 31st December, 1965	....	....	....	....	18
(b) Number of patients granted extra nourishment during the year	....	....	....	....	5
(c) Number of grants discontinued	....	....	....	....	10
(d) Number of patients receiving extra nourishment on 31st December, 1966	....	....	....	....	13
(e) Total number of orders issued from 1st January to 31st December	....	....	....	....	89

B. School Children Scheme.

1. No. of Medical Officers approved to undertake B.C.G. Vaccination	....	....	....	....	....	....	3
2. Acceptances.							
(a) No. of children offered tuberculosis testing and vaccination if necessary, whether the offer was made during the year or previously	....	....	....	....	....	575	
(b) No. of (a) found to have been vaccinated previously	....					12	
(c) No. of acceptances	....	....	....	....	....	429	
(d) Percentage of acceptances, i.e. (c) to (a)—(b)	....					76.19	
3. Pre-Vaccination Tuberculin Test.							
(a) No. of children [2(c)] tested	....	....	....	....		423	
(b) Result of test:—		Heaf Test.		Mantoux Test.			
(i) Positive	....	68		—			
(ii) Negative	....	355		—			
(iii) Not ascertained	....	—		—		
					Total	423	
(c) Percentage positive:—							
i.e. (b) (i) to (b) (i) + (ii)		16.07		—	Total	16.07	
4. Vaccination.							
No Vaccinated:							
(a) Following negative Heaf Test	....	....	....	....		355	
(b) Following negative Mantoux Test	....	....	....	....		—
					Total	355	

C. Students Attending Further Education Establishments.

1. Pre-Vaccination Tuberculin Test.

(a) No. of students tested	....	....	....	....	....	—
(b) Result of test:—		Heaf Test.		Mantoux Test.		
(i) Positive	....	—		—	
(ii) Negative	....	—		—	
(iii) Not ascertained	....	—		—	
					Total	—
(c) Percentage positive	....	—		—	Total	—

2. Vaccination.

No. vaccinated:

(a) Following negative Heaf Test	....	....	....	....	—
(b) Following negative Mantoux Test	....	....	....	....	—
				Total	—

Vaccination of Persons under age 16 Against Smallpox.

Age at date of vaccination	1. Number of Persons vaccinated (or re-vaccinated) during period		2. Number of Cases specially reported during period		Death from complications of vaccination other than
	Number vaccinated	Number re-vaccinated	Generalised Vaccinia	Post-Vaccinal Encephalo-myelitis	
			(a)	(b)	(a) and (b)
0—3 months	2	—	—	—	—
3—6 months	4	—	—	—	—
6—9 months	8	—	—	—	—
9—12 months	4	1	—	—	—
1	265	6	—	—	—
2—4	141	10	—	—	—
5—15	12	16	—	—	—
Total	436	33	—	—	—

VACCINATION AND IMMUNISATION.

Vaccination of Persons under age 16 Against Diphtheria, Whooping Cough, Tetanus and Poliomyelitis.

Completed Primary Courses.

Type of vaccine or dose	Year of birth					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
1. Quadruple DTPP	2	22	1	2	3	—	30
2. Triple DTP	406	373	28	24	25	1	857
3. Diphtheria/Pertussis	—	—	—	—	—	—	—
4. Diphtheria/Tetanus	—	—	—	1	7	—	8
5. Diphtheria	—	—	—	—	—	—	—
6. Pertussus	—	—	—	—	—	—	—
7. Tetanus	—	—	—	—	1	—	1
8. Salk	—	—	—	—	—	—	—
9. Sabin	424	521	74	38	102	8	1167
10. Lines 1+2+3+4+5 (Diphtheria)	408	395	29	27	35	1	895
11. Lines 1+2+3+6 (Whooping Cough)....	408	395	29	26	28	1	887
12. Lines 1+2+4+7 (Tetanus)	408	395	29	27	36	1	896
13. Lines 1+8+9 (Polio)	426	543	75	40	105	8	1197

Reinforcing Doses.

Type of vaccine or dose	Year of birth					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
1. Quadruple DTPP	—	2	—	1	1	—	4
2. Triple DTP	—	19	7	4	66	2	98
3. Diphtheria/Pertussis	—	—	—	—	—	—	—
4. Diphtheria/Tetanus	—	4	5	5	609	—	643
5. Diphtheria	—	—	—	—	1	—	1
6. Pertussus	—	—	—	—	—	—	—
7. Tetanus	—	—	—	—	2	—	2
8. Salk	—	—	—	—	—	—	—
9. Sabin	—	4	13	11	675	7	710
10. Lines 1+2+3+4+5 (Diphtheria)	—	25	12	10	697	2	746
11. Lines 1+2+3+6 (Whooping Cough)....	—	21	7	5	67	2	102
12. Lines 1+2+4+7 (Tetanus)	—	25	12	10	698	2	747
13. Lines 1+8+9 (Polio)	—	6	13	12	676	7	714

B.C.G. Vaccination.

A. Contact Scheme.

		Under 1 year Months				Years				All Ages			
		0-	1-	3-	6-	1-	2-	3-	4-	5-	10-	15-	20-
Vaccinated:													
Male ....	....	2	9	4	—	3	—	—	2	67	28	—	— 115
Female ....	....	1	9	1	1	2	2	1	2	60	12	2	2 95
Total ....	....	3	18	5	1	5	2	1	4	127	40	2	2 210
Result of Vaccination:													
Successful—													
Male ....	....	2	9	4	—	3	—	—	2	6	4	—	— 30
Female ....	....	1	9	1	1	2	2	1	2	1	1	2	2 25
Total ....	....	3	18	5	1	5	2	1	4	7	5	2	2 55
Unsuccessful—													
Male ....	....	—	—	—	—	—	—	—	—	—	—	—	—
Female ....	....	—	—	—	—	—	—	—	—	—	—	—	—
Total ....	....	—	—	—	—	—	—	—	—	—	—	—	—
Not finally ascertained:													
Male ....	....	—	—	—	—	—	—	—	—	61	24	—	— 85
Female ....	....	—	—	—	—	—	—	—	—	59	11	—	— 70
Total ....	....	—	—	—	—	—	—	—	—	120	35	—	— 155

DOMESTIC HELP.

A. Authorised Allocation.

(i) Basic	....	....	....	....	....	....	....	....	45½
(ii) Issues from Reserve Pool	....	....	....	....	....	....	....	....	—
(iii) Total	....	....	....	....	....	....	....	....	45½

B. Number of Domestic Helps Employed at 31st December.

(i) Whole-time	....	....	....	....	....	....	....	....	—
(ii) Part-time	....	....	....	....	....	....	....	....	90
(iii) Total	....	....	....	....	....	....	....	....	90

C. Cases Provided with Domestic Help during year ended 31st December.

Classification	No. of cases		No. of hours employed	
	From previous year	New cases	Total	
(i) Aged 65 or over on first visit during year	405	177	580	80690
(ii) Under 65 years on first visit during year:				
(a) Chronic sick and tuberculosis	23	15	38	4062
(b) Mentally disordered	—	—	—	—
(c) Maternity	—	25	25	882
(d) Others	16	21	37	3444
Totals	444	238	680	89078

D. Employment.

Equivalent number of Home Helps who could have been employed on a whole-time basis	42.8
--	------	------	------	------	------

NURSERIES AND CHILD-MINDERS REGULATION ACT, 1948.

(a) Nurseries registered under the Act:—

Name and Address of Premises.	No. of places provided	No. of visits of inspection during the year
(i) Factory:		
I. & I. Craven & Co. Ltd. Dalton Mills, Keighley	40	3
(ii) Other Nurseries:		
Southfield Day Nursery, Granby Lane, Riddlesden,	45	3
Temperance Hall, Keighley	15	—

(b) Daily Minders registered under the Act:—

Name and Address Daily Minder.	No. of Children	No. of visits of inspection during the year
Mrs. H. E. Belsey, "Brookfield," Oxenhope, Keighley	6	1

Chiropody Service.

Agency Service (Name of Voluntary Association)'—Keighley Old People's Welfare Committee.

No. of sessions held to 31st December, 1966		No. of patients treated				Total treatments given																		
In voluntary association's premises or clinics	In chiro- dists' surgeries	In voluntary association's premises or clinics	Dom- iliary	Total No. Treated	In chiro- dists' surgeries	In volun- tary associa- tion's premises or clinics	Dom- iliary	Total No. of Treatments																
									P	PHEM	P	PHEM	P	PHEM	P	PHEM								
11	2653	16	—	30	—	—	19	1	—	2702	17	—	13094	86	—	95	—	—	111	6	—	13300	92	—

P.—Pensioners.

P.H.—Physically Handicapped.

E.M.—Expectant Mother.

MENTAL HEALTH SERVICE.

Number of persons under Local Authority care at 31st December, 1966.

	Number of persons under Local Authority care at 31st December, 1954																		
	Mentally Ill				Elderly		Psychopathic				Subnormal				Severely Subnormal				
	Under 16		16 and over		mentally infirm		Under 16		16 and over		Under 16		16 and over		Under 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
1. Total number	—	—	7	32	2	10	—	—	—	—	17	11	33	34	1	1	—	—	148
2. Attending training centre	—	—	—	—	—	—	—	—	—	—	16	9	10	14	—	—	—	—	49
3. Awaiting entry to training centre	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. Receiving home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Awaiting home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. Resident in L.A. home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. Awaiting residence in L.A. home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Resident at L.A. expense in other residential homes/hostels	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
9. Resident at L.A. expense by boarding out in private household	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Attending day hospitals	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. Receiving home visits and not included in lines 2-10:	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(a) Suitable to attend training centres	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(b) Others	—	—	7	32	2	10	—	—	—	—	1	2	23	20	1	—	—	—	98

12. Number of children under age 16 attending training centres who have not been included in item 2 because they do not come within the categories covered in columns (1) to (18)

13. Number of persons included in item 6 who reside in accommodation provided under the National Assistance Act, 1948

Male
Female
Male
Female

Number of patients awaiting entry to hospital, admitted for temporary residential care or admitted to guardianship during 1955.

	Mentally Ill				Elderly		Psychopathic				Subnormal				Severely				Total
	Under 16 and		over		mentally		Under 16 and		over		Under 16 and		over		Under 16 and		over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
1. Number of persons in L.H.A. area on waiting list for admission to hospital at end of year																			
(a) In urgent need of hospital care																			
(b) Not in urgent need of hospital care																			
(c) Total																			
2. Number of admissions for temporary residential care (e.g., to relieve the family):																			
(a) To N.H.S. hospitals																			
(b) To L.A. residential accommodation																			
(c) Elsewhere																			
(d) Total																			
3. (a) Admission to guardianship during the year																			
L.H.A. Other																			
Total																			
(b) Total number under guardianship at end of year																			
L.H.A. Other																			
Total																			

Number of persons referred to Local Health Authority during year ended 31st December, 1966.

Referred by:	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Grand Total (17)
	Under 16 and over		16 and over		Under 16 and over		16 and over		Under 16 and over		16 and over		Under 16 and over				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
(a) General practitioners	—	1	140	305	—	—	—	—	5	2	12	6	2	—	—	—	473
(b) Hospitals, on discharge from in-patient treatment	—	—	26	59	—	—	—	—	—	1	9	1	—	—	—	—	96
(c) Hospitals, after or during out-patient or day treatment	—	—	34	36	—	—	—	—	8	4	25	4	3	—	—	—	114
(d) Local education authorities	—	—	—	—	—	—	—	—	3	—	1	1	—	—	—	—	5
(e) Police and courts	—	—	6	2	—	—	—	—	—	—	1	1	—	—	—	—	10
(f) Other sources	—	—	33	101	—	—	—	—	13	6	29	21	—	—	—	—	203
(g) Total	—	1	239	503	—	—	—	—	2	13	77	34	5	—	—	—	901

WELFARE OF THE BLIND—REGISTRATION.

Age Periods of Registered Blind Persons.

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Unknown	Total
M.	—	—	—	—	—	—	1	—	1	2	3	6	7	9	17	3	4	1	—	54
F.	—	—	—	—	—	—	1	—	1	—	3	4	7	12	32	15	16	4	—	95
Total	—	—	—	—	—	—	2	—	2	2	6	10	14	21	49	18	20	5	—	149

Age at onset of Blindness.

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Unknown	Total
M.	6	1	—	—	—	1	2	2	2	4	7	7	3	4	11	2	1	—	1	54
F.	8	—	—	—	—	1	1	—	2	4	5	14	12	16	21	8	2	1	—	95
Total	14	1	—	—	—	2	3	2	4	8	12	21	15	20	32	10	3	1	1	149

Children, age under 16
Age 5—15 +
Suitable for Education at School.

Attending Special Schools for the Blind .. 1 male and 1 female with no other defects.

Education, Training and Employment. Age periods, 16 years and upwards.

Employment under Sheltered Conditions in Special Workshops.								Employment under Ordinary Conditions.						Total Employed
		16-20	21-39	40-49	50-59	60-64	65 +	16-20	21-39	40-49	50-59	60-64	65 +	
Males	—	1	—	2	1	—	—	1	2	1	1	—	9
Females	—	—	—	—	—	—	—	—	1	—	—	—	1
Total	—	1	—	2	1	—	—	1	3	1	1	—	10

		Not Employed		No. of persons registered under the Disabled Persons (Employment) Act, 1944	
		Not available for work	Not capable of work	Not working 65 and over	Grand Total
		16-59	60-64	16-59	60-64
Males	....	—	—	5	5
Females	....	5	3	34	53
				79	94
Total	....	5	3	113	147

Occupations of Employed Blind Persons.

		Machine Tool Opera- tors		Boxers, Fillers, Packers		Machinists (Bedding, etc.)		Basket Makers		Mat Makers		Miscel- laneous Workers		Brush Makers		Total	
Employment under Sheltered Conditions:																	
In Special Workshops		—		—		1		1		1		1		—		4	
In Home Workers Schemes...		—		—		—		—		—		—		—		—	
Employment under Ordinary Conditions		2		1		—		—		—		—		2		6	
Total		2		1		1		1		1		1		2		10	

Physically Defective and Mentally Sub-Normal and Mentally Ill—All Ages.

				Deaf with Speech	Hard of Hearing	Mentally Sub-Normal and Deaf with Speech	Total
Males	...	...	...	1	4	—	5
Females	...	...	...	4	7	1	12
Total	...	...	...	5	11	1	17

Blind Persons aged 16 and upwards (excluding those in Hostels for workers)—resident in

Residential Accommodation provided
under Part III of the 1948 Act,
viz. Section 21

	Homes for the Blind	Other Homes	Residential Homes	Other Hospitals	Total
Males	1	2
Females	11	6	19
Total	11	7	21

Blind Persons Registered as New Cases (excluding recertifications and transfers from other areas) during the year—
age at date of registration.

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Unknown	Total
M.	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—	3
F.	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	5	1	1	—	8
Total	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	5	2	1	—	11

Blind Persons Registered as New Cases (excluding recertifications and transfers from other areas) during the year—
age at onset of Blindness.

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Unknown	Total
M.	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—	3
F.	—	—	—	—	—	—	—	—	—	—	—	—	—	1	6	—	—	1	—	8
Total	—	—	—	—	—	—	—	—	—	—	—	—	1	1	7	—	1	1	—	11

Number of Home Teachers engaged in the area.

Fractions to be used for Part-time Home Teachers.										Miscellaneous Information.				
Sighted		Certificated		Uncertificated		Grand Total		Number of Social Centres ...		} Joint ...		Number of Handicraft Classes		
		Blind	Total	Blind	Total	Blind	Total							
Males	—	—	—	—	—	—	—							1
Females	2	—	2	—	—	—	2							1
Total	2	—	2	—	—	—	2							

REGISTRATION OF PARTIALLY SIGHTED PERSONS.

Total Number on Register—Age Groups and Sex.										Cases Newly Registered (Excluding Recertifications and Transfers from other Areas), Age at Date of Registration.									
0-1		2-4	5-15	16-20	21-49	50-64	65 & over	Total		0-1		2-4	5-15	16-20	21-49	50-64	65 & over	Total	
M.	—	—	—	—	2	1	11	14	M.	—	—	—	—	—	—	—	3	3	
F.	—	—	1	1	2	9	22	35	F.	—	—	—	—	—	—	2	3	5	
Total	—	—	1	1	4	10	33	49	Total	—	—	—	—	—	—	2	6	8	

Removals from Register during the year for reasons set out below.

On admission to Blind Register.										On Decertification due to Improved Visual Acuity.									
		0-1	2-4	5-15	16-20	21-49	50-64	65 & over	Total			0-1	2-4	5-15	16-20	21-49	50-64	65 & over	Total
M.	—	—	—	—	—	—	—	—	—	M.	—	—	—	—	—	—	—	—	—
F.	—	—	—	—	—	—	—	2	2	F.	—	—	—	—	—	1	—	—	1
Total	—	—	—	—	—	—	—	2	2	Total	—	—	—	—	—	1	—	—	1

Persons near and Prospectively Blind (age 16 and over).

Employed.							Not available for, or not capable of, work.							Total.						
		16-20	21-49	50-64	65 & over	Total			16-20	21-49	50-64	65 & over	Total			16-20	21-49	50-64	65 & over	Total
M.	—	—	—	1	—	2	M.	—	—	—	—	2	2	M.	—	—	—	1	2	3
F.	—	1	1	1	—	1	F.	—	1	2	2	2	5	F.	—	2	3	2	2	7
Total	—	1	2	2	—	3	Total	—	1	2	4	4	7	Total	—	2	4	4	4	10

Persons Mainly Industrially Handicapped (aged 16 and over).

Employed.					Unemployed—Not under training. Not available for work.					Total.				
16-20 21-49 50-64 65 & over					16-20 21-49 50-64 65 & over					16-20 21-49 50-64 65 & over				
M.	—	2	—	2	M.	—	—	—	—	M.	—	2	—	2
F.	—	—	—	—	F.	1	—	—	1	F.	1	—	—	1
Total	—	2	—	2	Total	1	—	—	1	Total	1	2	—	3

Persons requiring Observation only (aged 16 and over).				
16-20 21-49 50-64 65 & over				
M.	—	—	—	9
F.	—	—	6	26
Total	—	—	6	35

Children age 5 and under 16 attending Special Schools.				
Males	....	....	....	—
Females	....	....	....	1
Total	....	....	....	1

Persons Registered under the Disabled Persons (Employment) Act, 1944.				
Males	....	....	....	1
Females	....	....	....	3
Total	....	....	....	4

FACTORIES ACT, 1961

1. Inspections for purpose of provisions as to health (including inspections made by Public Health Inspectors).

Premises (1)	Number on Register (2)	Inspec- tions (3)	Number of Written notices (4)	Number of Occupiers prose- cuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by the Local Authority	64	3	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	456	22	—	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-work-ers' premises)	9	—	—	—
Total	529	25	—	—

2. Cases in which Defects were found.

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases.")

Particulars (1)	Number of cases in which defects were found				Number of cases in which proce- dures were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of Cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7):					
(a) Insufficient	—	—	—	2	—
(b) Unsuitable or defective	—	—	—	5	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act not including offences relat- ing to Outwork)	—	—	—	—	—
Total	—	—	—	7	—

Part VIII of the Act.

Outwork.

(Sections 133 and 134).

Nature of Work	No. of out-workers in August list required by Section 133(1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecu- tions for failure to supply lists (4)	No. of instances of work in unwhole- some premises (5)	Notices served (6)	Prosecu- tions (7)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing apparel: Making, etc.	47	—	—	—	—	—
Textile Weaving....	6	—	—	—	—	—
Total	57	—	—	—	—	—

THE OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

Table A.

Registrations and General Inspections.

Class of Premises	Number of Premises registered during the year	Total number of registered premises at end of year	Number of registered premises receiving a general inspection during the year
Offices	38	167	62
Retail shops	47	329	167
Wholesale departments, warehouses	10	34	16
Catering establishments open to the public, canteens	14	48	35
Fuel storage depots	1	2	—
Total	110	580	200

Table B.

NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES	22
--	-----	-----	-----	----

Table C.

Analysis of Persons Employed in Registered premises in Workplaces.

	Class of workplace		Number of persons employed	
	(1)		(2)	
Offices	1437
Retail shops	1337
Wholesale departments, warehouses	183
Catering establishments open to the public	281
Canteens	26
Fuel storage depots	5
Total	3269
Total Males	1389
Total Females	1880

Table D—Exemptions.

M/c. Line No.	Class of premises	No. of exemptions current at 31st December (2)	No. of exemptions granted or extended during year (3)	No. of applications refused or exemptions withdrawn during year (4)	No. of cases in cols (3) and (4) where employees opposed application (5)	Appeals to Court against refusal to grant or extend an exemption or against the withdrawal of an exemption No. made (6)	No. allowed (7)
Part I—Space (Sec. 5 (2))							
1.	Offices						
2.	Retail shops						
3.	Wholesale shops, warehouses						
4.	Catering establishments open to public, canteens	Nil	Nil	Nil	Nil		Nil
5.	Fuel storage depots						
Part II—Temperature (Sec. 6).							
11.	Offices						
12.	Retail shops						
13.	Wholesale shops, warehouses						
14.	Catering establishments open to public, canteens	Nil	Nil	Nil	Nil		Nil
15.	Fuel storage depots						
Part III—Sanitary Conveniences (Sec. 9).							
21.	Offices						
22.	Retail shops						
23.	Wholesale shops, warehouses						
24.	Catering establishments open to public, canteens	Nil	Nil	Nil	Nil		Nil
25.	Fuel storage depots						
Part IV—Washing Facilities (Sec. 10).							
31.	Offices						
32.	Retail shops						
33.	Wholesale shops, warehouses						
34.	Catering establishments open to public, canteens	Nil	Nil	Nil	Nil		Nil
35.	Fuel storage depots						

Table E—Prosecutions.

Prosecutions Instituted of which the hearing was completed in the year.

Section of Act or title of Regulation or Order	No. of persons or companies prosecuted	No. of informations laid	No. of informations leading to a conviction
Nil	Nil	Nil	Nil
No. of complaints (or summary applications) made under section 22 ....	....	....	....
No. of interim orders granted ....	....	....	....

Table F—Inspectors.

No. of Inspectors appointed under Section 52 (i) or (5) of the Act ....	....	....	....	5
No. of other staff employed for most of their time on work in connection with the Act ....	....	....	....	Nil

NOTICES SERVED AND COMPLIED WITH.

	Notices Served		Notices complied with (including matters brought forward from 1964)	
	Informal	Formal	Informal	Formal
Public Health Acts	68	11	50	127
Housing Act	—	218	—	130
Factories Act	—	—	—	—
Milk and Dairies Order	—	—	—	—
Shops Acts	—	—	—	—
Keighley Corporation Acts	—	—	—	—
Food and Drugs Act, 1955	—	—	—	—
West Riding County Council (General Powers Act, 1951)	—	—	—	—
Clean Air Act, 1956	—	44	—	121
Rent Act, 1957	—	—	—	—

Clearance Areas represented from 1958.

Area	Date Represented	Date of Public Inquiry	Date Confirmed	No. of Houses
Calversyke	19.3.58	10.12.58	27.4.59	21
Central No. 1	22.1.58	26.11.58	28.5.59	34
Central No. 2	22.1.58	26.11.58	28.5.59	23
Central No. 3	22.1.58	26.11.58	28.5.59	9
Wesley Place No. 1	30.4.59	25.11.59	14.7.60	31
Ebenezer Square	30.4.59	25.11.59	22.6.60	53
South Street No. 1	2.7.59	29.3.60	19.10.60	59
South Street No. 2	2.7.59	29.3.60	19.10.60	14
Worth Village	2.7.59	29.3.60	21.11.60	57
Hermit Hole No. 1	23.7.59	25.5.60	1.1.61	12
Hermit Hole No. 2	23.7.59	25.5.60	1.2.61	3
Hermit Hole No. 3	23.7.59	25.5.60	1.2.61	2
Hermit Hole No. 4	23.7.59	25.5.60	1.2.61	51
Hainworth Cragg Road	23.7.59	25.5.60	1.2.61	6
Seed Street	3.12.59	—	24.3.60	20
Eastwood Square	3.12.59	21.6.60	16.1.61	26
Bocking	3.12.59	21.4.60	20.7.60	14
Pitt Street—Parkwood	15.6.60	28.3.61	18.8.61	106
Berry Ltne	16.2.60	21.2.61	6.7.61	73
Aireworth Road	15.6.60	—	10.6.61	5
Beech Grove	19.10.60	22.8.61	30.11.61	29
Woodhouse Road	19.10.60	22.8.61	30.11.61	12
Heys Gardens, South St.	19.4.61	—	27.4.62	8
Oakworth Road/ Aireworth Street	11.7.62	22.5.63	14.8.63	210
Haworth No. 1	27.2.63	10.12.63	9.7.64	33
Haworth No. 2	27.2.63	10.12.63	9.7.64	4
Gotts Terrace and Wrights Terrace	27.2.63	10.12.63	18.2.64	14
Low Well Street, South Street, Brigg Street	10.7.63	12.5.64	4.11.64	88
Worth Village No. 2	14.10.64	9.6.65	18.10.65	35
Worth Village No. 3	14.10.64	9.6.65	18.10.65	171
Mohair Street/Woollen Street/Mount Street	25.11.64	14.9.65	2.11.65	68
Haworth No. 3	16.3.66	19.4.67	19.4.67	31
Bradford Street— Bingley Street No. 1	16.3.66	30.1.67	30.1.67	26
Bingley Street No. 2	16.3.66	30.1.67	—	6
Bingley Street No. 3	16.3.66	30.1.67	—	16
Bingley Street No. 4	16.3.66	30.1.67	—	8
Rock Street, East Crag Street	6.10.66	—	—	10
Haworth Road, Rock Street, E. Crag Street	6.10.66	—	—	23
Hainworth Road	6.10.66	—	—	14
Parkwood Street No. 1	17.11.66	—	—	50
Parkwood Street No. 2	17.11.66	—	—	30
Total				1505

List of Registered Premises.

No. Registered under Food and Drugs Act ....	....	....	150
Ice Cream Retailers Registered ....	....	....	246
Dairies (Excluding Farm Dairies) ....	....	....	15
Restaurants, Cafes and Snack Bars ....	....	....	80
Bakehouses (Four licensed) ....	....	....	55
No. of Premises authorised under Ice Cream (Heat Treatment) Regulations ....	....	....	2
Grocers and Other Food Shops ....	....	....	447
Food Hawkers and Mobile Shops ....	....	....	35
Licensed Houses ....	....	....	61
Butchers' Shops ....	....	....	70
Factory and Workshop Canteens ....	....	....	14
Hospital Kitchens ....	....	....	3
Schools Kitchens and Canteens ....	....	....	18
			1196

Schedule 3.

MILK AND FOOD SAMPLING—CHEMICAL ANALYSIS.

Type of Food Submitted	No. of Samples	Genuine	Not Genuine
Milk (Informal)	22	22	—
Beef Sausage (Informal)	18	18	—
Pork Sausage (Informal)	16	16	—
Pork Sausage (Formal)	1	1	—
Apricot Jam (Informal)	1	1	—
Dairy Cream (Informal)	2	2	—
Cream Buns (Informal)	2	2	—
Ground Almonds (Informal)	1	1	—
Lemon Cheese (Informal)	1	1	—
Peanut Butter (Informal)	1	1	—
Beef Meat Paste (Informal)	1	1	—
Chocolate (Informal)	1	1	—
Blackcurrant (Informal)	1	1	—
Double Gin (Informal)	1	1	—
Brandy (Informal)	1	1	—
Double Rum (Informal)	1	1	—
Double Whisky (Informal)	1	1	—
Fruit Drink (Informal)	3	3	—
Rice Pudding (Informal)	1	1	—
Tinned Fruits (Informal)	3	3	—
Dried Onions (Informal)	1	1	—
Cheese (Informal)	6	6	—
Jelly (Informal)	2	2	—
Tea (Informal)	1	1	—
Meringue (Informal)	1	1	—
Dripping (Informal)	1	1	—
Brown Sugar (Informal)	1	1	—
Peeled Tomato (Informal)	1	1	—
Butter (Informal)	1	1	—
Dessicated Coconut (Informal)	1	1	—
Lard (Informal)	1	1	—
Marzipan (Informal)	1	1	—
Salmon (Informal)	1	1	—
Damson Jam (Informal)	1	1	—
Mincemeat (Informal)	1	1	—
Sardines (Informal)	1	1	—
Piccallili (Informal)	1	1	—
Cream Buns (Formal)	1	1	—
	99	99	—

FOOD SAMPLING FOR PESTICIDE AND INSECTICIDE RESIDUE.

	No. of Samples	Satisfactory	Unsatisfactory
Potatoes	1	1	—

Total Weight of other Foodstuffs condemned.

Type of Food Condemned						Weight		Lbs.
						Tons	Cwts. Qrs.	
Meat, Bacon and Ham	....	....	....	....	....	—	2 —	3
Corned Beef	....	....	....	....	....	—	2 —	25
Pork and Ham (Tinned)	....	....	....	....	....	—	3 1	13
Other Meats (Tinned)	....	....	....	....	....	—	7 —	20
Chicken (Tinned)	....	....	....	....	....	—	1 —	22
Chicken (Frozen)	....	....	....	....	....	—	— —	—
Fish (Tinned)	....	....	....	....	....	—	— 2	23
Soup (Tinned)	....	....	....	....	....	—	— —	2
Pickles and Vinegar	....	....	....	....	....	—	— —	26
Butter and Cheese	....	....	....	....	....	—	— —	18
Fruit (Tinned)	....	....	....	....	....	—	15 3	10
Fruit (Dried)	....	....	....	....	....	—	— 3	2
Fruit Juice	....	....	....	....	....	—	— —	—
Jam and Marmalade	....	....	....	....	....	—	— 1	7
Tomatoes (Tinned)	....	....	....	....	....	—	1 1	6
Vegetables (Tinned)	....	....	....	....	....	—	5 3	10
Puddings (Tinned)	....	....	....	....	....	—	2 1	11
Milk and Cream (Tinned)	....	....	....	....	....	—	— 2	15
Cereals	....	....	....	....	....	—	— 1	11
Canned Drinks	....	....	....	....	....	—	— —	—
Steak and Vegetables	....	....	....	....	....	—	— 3	18
Eggs	....	....	....	....	....	—	2 —	14
						2	7 2	4

Summary of Animals Slaughtered and Inspected at the Public Abattoir.

	Cattle (excl. Cows)	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	5393	1370	175	28622	9875	Nil
Number inspected	5393	1370	175	28622	9875	Nil
All Diseases except Tuberculosis and Cysticerci:						
Whole carcasses condemned	Nil	3	7	52	17	Nil
Carcasses of which some part or organ was condemned	785	163	Nil	2570	417	Nil
Percentage of the number in- spected affected with disease other than tuberculosis and cysticerci	14.58%	12.11%	4.00%	9.19%	4.37%	Nil
Tuberculosis only:						
Whole carcasses condemned	Nil	Nil	Nil	Nil	2	Nil
Carcasses of which some part or organ was condemned	Nil	Nil	Nil	Nil	15	Nil
Percentage of the number in- spected affected with tuber- culosis	Nil	Nil	Nil	Nil	0.17%	Nil
Cysticercosis:						
Carcasses of which some part or organ was condemned	6	Nil	Nil	Nil	Nil	Nil
Carcasses submitted to treat- ment by refrigeration	2	Nil	Nil	Nil	Nil	Nil
Generalised and totally con- demned	Nil	Nil	Nil	Nil	Nil	Nil

Total Number of Animals killed and weight in lbs. of Unsound Meat
surrendered at Public Abattoir and Private Slaughterhouses.

	Total No. of Animals Killed and Inspected	Whole Carcases Other T.B. Causes	Part Carcases Other T.B. Causes	Offal Other T.B. Causes	Total Other T.B. Causes
Cows	1882	— 3027	— 325	— 1020	— 4372
Other Cattle	8636	— 1286	30 1652	— 18383	30 21320
Sheep	39691	— 3648	— 206	— 5044	— 8898
Pigs	15268	400 2913	731 1613	— 931	1131 5457
Calves	205	— 484	— 4	— —	— 488
Total	65682	400 11358	761 3800	— 25378	1161 40535

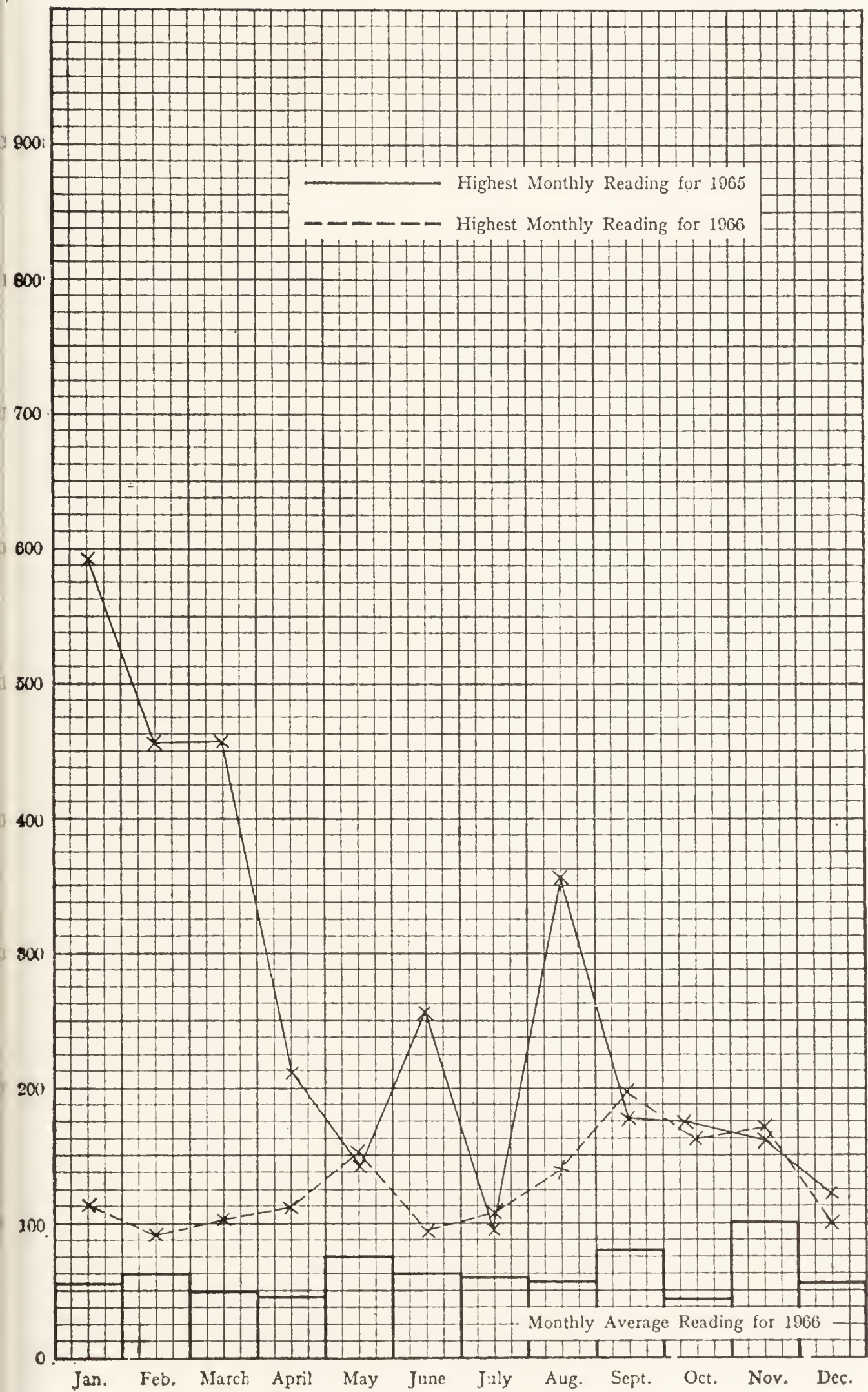
Summary of Animals Slaughtered and Inspected at Private Slaughterhouses.

	Cattle (excl. Cows)	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	3243	512	30	11069	5393	Nil
Number inspected	3243	512	30	11069	5393	Nil
Diseases except tuberculosis and Cysticerci:						
Whole carcasses condemned	Nil	1	2	4	5	Nil
Carcasses of which some part or organ was condemned	912	37	Nil	529	441	Nil
Percentage of the number in- spected affected with disease other than tuberculosis and cysticerci	28.11%	7.24%	6.66%	4.77%	8.27%	Nil
tuberculosis only:						
Whole carcasses condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcasses of which some part or organ was condemned	1	Nil	Nil	Nil	36	Nil
Percentage of the number in- spected affected with tuber- culosis ....	.03%	Nil	Nil	Nil	0.66%	Nil
Cysticercosis:						
Carcasses of which some part or organ was condemned	3	Nil	Nil	Nil	Nil	Nil
Carsases submitted to treat- ment by refrigeration	2	Nil	Nil	Nil	Nil	Nil
Generalised and totally con- demned	2	Nil	Nil	Nil	Nil	Nil

Weight (in Lbs.) of Meat Condemned for the reasons specified.

Disease				Cows	Other Cattle	Sheep	Pigs	Calves
Abscess and Pyaemia	....	....	....	219	2123	71	1774	80
Actinomycosis and Actinobacillosis				90	602	—	—	—
Angiomatosis	....	....	....	321	263	41	—	—
Arthritis	....	....	....	—	40	20	68	40
Cirrhosis	....	....	....	78	72	—	17	—
Cysticercus Bovis	....	....	....	920	328	—	—	—
Decomposition	....	....	....	625	112	246	36	—
Dropsy and Emaciation	....	....	....	266	—	964	250	—
Enteritis	....	....	....	—	—	—	—	85
Fever	.....	....	....	—	—	43	—	—
Icterus	....	....	....	—	—	—	391	40
Ill-Bled	....	....	....	—	—	50	90	—
Immaturity	....	....	....	—	—	—	—	115
Injury, Bruising	....	....	....	—	—	551	86	—
Joint Ill	....	....	....	—	—	—	—	50
Mastitis	....	....	....	386	—	—	—	—
Melanosia	....	....	....	—	6	3	—	—
Necrosis	....	....	....	12	843	—	2	—
Nephritis	....	....	....	340	—	—	5	—
Oedema	....	....	....	460	—	26	—	—
Parasitic Inc. Distomatosis, Ecc Vet and Strongyli	....	....	....	605	16338	6526	1158	—
Pericarditis	....	....	....	—	50	—	188	—
Peritonitis	....	....	....	—	—	—	70	78
Pleurisy and Pneumonic Condi- tions	....	....	....	34	531	357	1154	—
Septicaemia	....	....	....	—	—	—	168	—
Septic Metritis	....	....	....	12	—	—	—	—
Tuberculosis	....	....	....	—	30	—	1131	—
Xanthosis	....	....	....	4	12	—	—	—
Grand Total	....	....	....	4372	21350	8898	6588	488

GRAPH OF VOLUMETRIC RECORDINGS AT 3, BOW STREET, KEIGHLEY (Figures given in microgrammes per cubic meter)



RAINFALL FOR 1966.

The total amount of rainfall recorded during the year is given in the following table. The rainfall gauge is situated in a field at the Public Abattoir and the table shows the daily readings taken during the year.

Date	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1	.18	—	.05	—	—	—	—	.11	.23	.35	.10	.78
2	—	.05	.04	.69	—	—	—	.33	.27	—	.02	.02
3	*	.03	.01	—	—	—	—	.14	.12	.84	—	—
4	.03	.04	—	.01	.21	.22	.02	.05	—	.26	—	—
5	.16	.11	—	.72	.47	—	.01	—	.06	.14	.47	.18
6	—	—	—	.01	*	.01	—	.20	—	—	—	—
7	—	1.04	.01	—	.16	—	—	—	—	.08	.08	.09
8	—	.55	—	—	—	—	—	—	—	—	.01	.50
9	—	.02	.07	1.14	—	—	—	.16	.26	—	—	.46
10	—	.01	.12	—	—	—	.21	—	—	.06	—	.15
11	*	.05	.01	1.31	1.31	.01	*	.37	.42	—	.02	—
12	.01	—	—	—	.01	—	—	.58	.01	—	—	.11
13	.02	—	—	—	—	—	.03	.23	.67	1.03	.29	—
14	.10	—	—	.03	—	.01	*	—	.01	.17	.11	.04
15	.08	.07	—	.16	—	—	.16	—	—	.12	.62	.01
16	—	—	—	.0	—	.35	—	—	.04	—	—	*
17	—	—	.06	—	.03	.45	—	—	—	.08	.03	.55
18	—	.99	—	.21	—	—	—	—	—	.07	.11	—
19	—	1.10	—	.14	.19	.36	—	—	—	.04	—	.42
20	.07	—	—	.04	.07	—	—	—	—	.03	.01	.01
21	*	.05	—	.15	.09	.10	—	1.56	—	—	*	.01
22	.06	.25	.09	—	—	.62	.27	—	—	.08	—	.03
23	—	.72	—	.53	*	—	—	—	—	—	—	.26
24	*	.76	—	—	.04	.21	.20	—	—	*	.02	—
25	.19	.07	.11	—	.01	—	—	—	—	—	.06	.05
26	.38	.30	.61	.8	*	.41	.02	—	—	.16	—	—
27	.53	—	—	—	—	.07	.45	.05	—	*	.20	—
28	—	—	—	—	—	—	.10	—	—	—	*	.12
29	*	—	.02	—	—	—	.43	1.03	—	—	.91	.44
30	—	—	.06	—	—	—	—	—	.16	—	.29	.15
31	.04	—	.09	—	—	—	.04	*	—	—	—	.04
Total	1.85	6.58	1.38	4.0	3.41	2.88	2.32	4.81	2.25	3.51	3.35	4.42

Total Rainfall for the year - 40.76

* Denotes Trace.

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